

Ohio EPA

Re: Lucas County
Hazardous Waste
Borden Chemical Printing Ink
HWFAB #03-48-0146
G-TSDF

Mr. Thomas W. Shadle
Operations Manager
Borden Chemical Printing Ink
6725 Gilead Street
Whitehouse, OH 43571

August 13, 1984

Dear Mr. Shadle:

On July 13, 1984, I inspected your facility for compliance with state and federal hazardous waste regulations. You represented the company. At that time you were in compliance.

As we discussed, you will hear more official word on the withdrawal of your permit. In the meantime, you should still plan to get rid of any waste over the Small Quantity Limitation (1000 kg) within 90 days.

Please do not hesitate to call if you have any questions.

Sincerely,



David L. Ferguson
Division of Solid and Hazardous
Waste Management

DLF/kb

Enclosure

cc: Paula Cotter, DSHWM, CO

July 13, 1987
Date and Time of Inspection

RCRA INTERIM STATUS INSPECTION FORM

PART 1. GENERAL INFORMATION

HWFAB # 03-48-0146

U.S. EPA I.D. # OH 005 043 740

Facility: Borden Chemical Printing ^{INR} Address: 6725 Gilead St City: Wilmington

State: OH Zip Code: 43571 County: Lucas Telephone: 419-877-5382

INSPECTION PARTICIPANTS(S)

	(Name)	(Title)	(Telephone)
1.	<u>Thomas W. Shadle</u>	<u>Operations Mgr.</u>	<u>419-877-5352</u>
2.			
3.			
1.	<u>Alene Ferguson</u>	<u>INSP</u> <u>Dir of Sol. & Haz. Waste Div.</u>	<u>419-353-8461</u>
2.			
3.			

INSTALLATION ACTIVITY

Mark One

If the site is a TSD, check the boxes indicating which regulations are applicable.

<input type="checkbox"/> Generator only (G)	<input type="checkbox"/> General Facility Standards, Preparedness and Prevention, Contingency and Emergency, Manifests/Records/Reporting, Closure	<input type="checkbox"/> Waste Piles S03
<input type="checkbox"/> Transporter (T)	<input type="checkbox"/> Containers S01	<input type="checkbox"/> Land Treatment D81
<input type="checkbox"/> TSD only	<input checked="" type="checkbox"/> Tanks S02/T01	<input type="checkbox"/> Landfills D80
<input type="checkbox"/> G-T	<input type="checkbox"/> Surface Impoundments S04/T02	<input type="checkbox"/> Chemical/Physical/Biological T04
<input checked="" type="checkbox"/> G-TSD	<input type="checkbox"/> Incineration/Thermal Treatment	<input type="checkbox"/> Groundwater Monitoring
<input type="checkbox"/> T-TSD		<input type="checkbox"/> Post-Closure
<input type="checkbox"/> G-T-TSD		

RCRA INTERIM STATUS INSPECTION FORM

1. Has the facility submitted a Part A to Ohio?
2. If "yes", is it complete and accurate?
3. Has the facility submitted a Part B?

<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REMARKS, PART 1. GENERAL INFORMATION

Include a brief description of site activity and waste handling.

As a formality, a TSD inspection was done.

The reasons for the facility being able to operate as a G or probably SQG are explained in the cover letter of the P-30-83 inspection. Namely the printing ink waste is no longer classed as H.W.

RCRA INTERIM STATUS INSPECTION FORM

PART 4. GENERAL INTERIM STATUS REQUIREMENTS

SUBPARTS INCLUDED

B: General Facility Standards
C: Preparedness and Prevention

D: Contingency and Emergency
E: Manifest/Records/Reporting

G: Closure
H: Financial Requirements

Subpart B: General Facility Standards

	Yes	No	N/A	Remark #
1. The operator has a detailed chemical and physical analysis of the waste material containing all of the information which must be known to properly treat or store the waste as required by Section 265.13(a)(1).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The operator has a written waste analysis plan which describes analytical parameters, test methods, sampling methods, testing frequency and responses to any process changes that may affect the character of the waste (Section 265.13(b)).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. a) Physical contact with the waste structures or equipment will not injure unknowing/unauthorized persons or livestock entering the facility (265.14(a)(1)).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Disturbance of the waste will not cause a violation of the hazardous waste regulations (265.14(a)(2)).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IF BOTH 3a AND 3b ARE "YES", MARK QUESTIONS 4 AND 5 "NOT APPLICABLE".				
4. The facility has -	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) A 24-hour surveillance system, <u>or</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) An artificial or natural barrier <u>and</u> a means to control entry at all times (265.14(b)(2)).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
5. The facility has a sign "Danger-Unauthorized Personnel Keep Out" at each entrance to the active portion of the facility and at other locations as necessary. (265.14(c))	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. a) The operator must develop and follow a comprehensive, written inspection plan and must document the inspections, malfunctions and any remedial actions taken in an operating record log which is kept for at least three years. (265.15)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b) Areas subject to spills (i.e., loading and unloading areas, container storage areas, etc.) are inspected daily when in use and according to other applicable regulations when not actively in use. (265.15(b)(4))	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility has provided a Personnel Training Program in compliance with Section 265.16(a)(b)(c) including instruction in safe equipment operation and emergency response procedures, training new employees within 6 months and providing an annual training program refresher course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The facility keeps all records required by Section 265.16(d)(e) including written job titles, job descriptions and documented employee training records.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. If required due to the actual hazards associated with Ignitable, Reactive or incompatible waste materials, the facility meets the following requirements (Section 265.17).				
a) Protection from sources of ignition.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b) Physical separation of incompatible waste materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c) "No Smoking" or "No Open Flames" signs near areas where Ignitable or Reactive wastes are handled.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
d) Any comingling of waste materials is done in a controlled, safe manner as prescribed by Section 265.17(b).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

RCRA INTERIM STATUS INSPECTION FORM

Subpart C: Preparedness and Prevention

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
1. Has there been a fire, explosion or non-planned release of hazardous waste at this facility? (265.31)	<input checked="" type="checkbox"/>			
2. If required due to actual hazards associated with the waste material, the facility has the following equipment: (265.32)				
a) Internal alarm system.	<input checked="" type="checkbox"/>			
b) Access to telephone, radio or other device for summoning emergency assistance.	<input checked="" type="checkbox"/>			
c) Portable fire control equipment.	<input checked="" type="checkbox"/>			
d) Water at adequate volume and pressure via hoses sprinkler, foamers or sprayers.	<input checked="" type="checkbox"/>			
3. All required safety, fire and communications equipment is tested and maintained as necessary; testing and maintenance are documented. (265.33)	<input checked="" type="checkbox"/>			
4. If required due to the actual hazards associated with the waste material, personnel have immediate access to an emergency communication device during times when hazardous waste is being physically handled. (265.34)	<input checked="" type="checkbox"/>			
5. If required due to the actual hazards associated with the waste material, adequate aisle space to allow unobstructed movement or emergency or spill control equipment is maintained. (265.35)	<input checked="" type="checkbox"/>			
6. If required due to the actual hazards associated with the waste material, the facility has attempted to make appropriate arrangements with local emergency service authorities to familiarize them with the possible hazards and the facility layout. (265.37(a))	<input checked="" type="checkbox"/>			
7. Where state or local emergency service authorities have declined to enter into any proposed special arrangements or agreements the refusal has been documented. (265.37(b))			<input checked="" type="checkbox"/>	

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

Subpart D: Contingency and Emergency

1. The facility has a written Contingency Plan designed to minimize hazards from fires, explosions or unplanned releases of hazardous wastes (265.51) and contains the following components:

- a) Actions to be taken by personnel in the event of an emergency incident. ☒
- b) Arrangements or agreements with local or state emergency authorities. ☒
- c) Names, addresses and telephone numbers of all persons qualified to act as emergency coordinator. ☒
- d) A list of all emergency equipment including location, physical description and outline of capabilities. ☒
- e) If required due to the actual hazards associated with the waste(s) handled, an evacuation plan for facility personnel. (265.51(f)) ☒

2. A copy of the Contingency Plan and any plan revisions is maintained on-site and has been submitted to all local and state emergency service authorities that might be required to participate in the execution of the plan. (265.53) ☒

3. The plan is revised in response to facility, equipment and personnel changes or failure of the plan. (265.54) ☒

4. An emergency coordinator is designated at all times (on-site or on-call) is familiar with all aspects of site operation and emergency procedures and has the authority to implement all aspects of the Contingency Plan. (265.56) ☒

5. If an emergency situation has occurred, the emergency coordinator has implemented all or part of the Contingency Plan and has taken all of the actions and made all of the notifications deemed necessary under Sections 265.56. ☒

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

NOTE : THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO BOTH ON-SITE AND OFF-SITE TREATMENT, STORAGE AND DISPOSAL FACILITIES.

Subpart E: Manifests/Records/Reporting

1. The operator maintains a written operating record at his facility as required by Section 265.73 which contains the following information:
 - a) Description and quantity of each hazardous waste treated, stored or disposed of within the facility and the date(s) and method(s) pertinent to such treatment storage or disposal. (262.73(b)(1)) ☒ #1
 - b) Common name, EPA Hazardous Waste Identification Number and physical state (liquid, solid, gas) of the waste(s). ☒
 - c) The estimated (or actual) weight, volume or density of the waste material(s). ☒
 - d) A description of the method(s) used to treat, store or dispose of the waste(s) using the EPA Handling Codes listed in 45 FR 33252 (May 19, 1980). ☒
 - e) The present physical location of each hazardous waste within the facility. ☒
 - f) FOR DISPOSAL FACILITIES, the location and quantity of each hazardous waste recorded on a map of the facility and cross-references to any pertinent manifest document number(s). (265.73(b)(2)) ☒
 - g) Records of any waste analyses and trial tests required to be performed. ☒
 - h) Records of the inspections required under Section 265.15 (General Inspection Requirements - Subpart B). ☒
 - i) Records of any monitoring, testing or analytical data required under other Subparts as referenced by Section 265.73(b)(6). ☒
 - j) Records of Closure cost estimates and Post-Closure (DISPOSAL ONLY) cost estimates required under Subpart G. ☒

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

- The operators has submitted an annual Treatment-Storage-Disposal Operating Report (by March 1) containing all of the operating information required under Section 265.75.

NOTE : THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO ONLY OFF-SITE TREATMENT, STORAGE AND DISPOSAL FACILITIES.

- Manifests received by the facility are signed and dated; one copy is given to the transporter, one copy is sent to the generator within 30 days and one copy is kept for at least 3 years. (265.71)

a) If shipping papers are used in lieu of manifests (bulk shipments, etc.) the same requirements are met. (265.71(b))

b) Any significant discrepancies in the manifest, as defined in Section 265.72(a) are noted in writing on the manifest document. (265.71(a)(2))

- Any manifest discrepancies have been reconciled within 15 days as required by Section 265.72(b) or the operator has submitted the required information to the Regional Administrator/Director.

- If the facility has accepted any unmanifested hazardous wastes from off-site sources (except from small quantity generators) for treatment, storage, or disposal an unmanifested waste report containing all the information required by Section 265.76 has been submitted to the Regional Administrator/Director within 15 days.

Subpart G: Closure and Post-Closure

NOTE : THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO BOTH DISPOSAL AND NON-DISPOSAL FACILITIES.

- A written Closure Plan is on file at the facility and contains the following elements: (Section 265.112)

a) A description of how and when the facility will be closed. (265.112(a)(1)).

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
b) A description of how any of the applicable closure requirements in other Subparts of Section 265 (Tanks, Surface Impoundments, Landfill, etc.) will be carried out.	—	—	✓	<u>See #</u>
c) An estimate of the maximum amount of hazardous wastes being treated or in storage at the facility. (NOTE: Maximum inventory should agree with the permit.)	—	—	✓	—
d) A description of steps taken to decontaminate facility equipment.	—	—	✓	—
e) The year closure is expected to begin and a schedule for the various phases of closure.	—	—	✓	—
2. The Closure Plan has been amended within 60 days in response to any changes in facility design, processes or closure dates.	—	—	✓	—
3. The Closure Plan has been submitted to the Regional Administrator/Director 180 days prior to beginning the Closure process.	—	—	✓	—

Subpart H: Financial Requirements

1. The owner or operator of the facility has established financial assurance for closure by use of one of the following: (265.143)	
a) A closure trust fund, or	— ✓ <u>See #</u>
b) A surety bond, or	— ✓
c) A closure letter of credit, or	— ✓
d) A combination of financial mechanisms.	— ✓

NOTE : COMPLIANCE WITH THESE REGULATIONS IS A FEDERAL REQUIREMENT.

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

2. A written cost estimate for closure of the facility (as specified in the closure plan) is available.

— — — See #2

REMARKS, PART 4. GENERAL INTERIM STATUS REQUIREMENTS

Remark #1. Sub Part E. The facility is acting as a generator and has no specific Operating Record. The manifests serve the same purpose

Remark #2 C. Michael Smith, P.E., of Mennick + Smith consultants "closed" the facility on 9-13-83. However, waste will be generated in small quantities.

RCRA INTERIM STATUS INSPECTION FORM

PART 5. TREATMENT/STORAGE/DISPOSAL

SUBPARTS INCLUDED

I: Management of Containers	L: Waste Piles	O: Incinerators
J: Management of Tanks	M: Land Treatment	P: Thermal Treatment
K: Surface Impoundments	N: Landfills	Q: Chemical/Physical/Biological Treatment

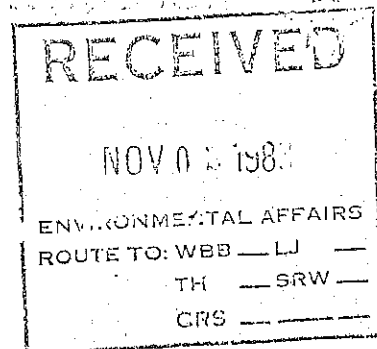
Subpart I: Management of Containers

<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
1. Hazardous wastes are stored in containers which are:			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Closed (265.173)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) In good physical condition (265.171)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Compatible with the wastes stored in them (265.172)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Containers are stored closed except when it is necessary to add or remove wastes. (265.173(a))			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Hazardous waste containers are not stored, handled or opened in a manner which may rupture the container or cause it to leak. (265.173(b))			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The area where containers are stored is inspected for evidence of leaks or corrosion at least weekly and such inspections are documented. (265.174)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Containers holding Ignitable or Reactive waste(s) are located at least 50 feet (15 meters) from the property line and the general requirements for handling such wastes in Section 265.17 (physical separation, signs and safety) are met (265.176).			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Containers holding hazardous wastes are never stored near other materials which may interact with the waste in a hazardous manner. (265.177(c))			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Manack & Smith

October 25, 1983

Borden Inc.
Environmental Affairs
165 N. Washington Avenue
Columbus, OH 43215



Attn: Mr. Thomas R. Heaton

Re: Closure Plan
Borden Chemical
Whitehouse, Ohio

Gentlemen:

Pursuant to your request, our office has reviewed the Closure and Post-Closure Plan for your Printing Ink Division facility located at 6525 Gilead Street, Whitehouse, Ohio. More specifically, our review was orientated to your September 9, 1982 request to USEPA Region V for withdrawal of your RCRA permit for the storage of hazardous waste material at this facility. The undersigned, on September 13, 1983 visited the site and was given a tour of the facility by Mr. Thomas W. Shadle, Plant Manager. At that time, there was no evidence that any hazardous waste was currently being stored on site, nor any evidence that a spill of any nature had occurred previously. It appeared that the area designated for the storage of hazardous waste material had been thoroughly cleaned and all drums and storage containers properly removed from the site.

It is our understanding that the facility is continuing to generate hazardous waste and that storage of this waste in the future will be for a period of less than 90 days.

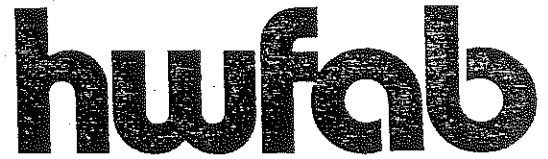
Based on the above, I hereby certify that the drum storage area has been closed in accordance with the facility's approved closure plan.

Very truly yours,

C. Michael Smith
C. Michael Smith, P.E.

hm
B70A1

cc: Mr. Thomas W. Shadle
file (2)



P.O. Box 1049
361 E. Broad St.
Columbus, Ohio 43216
(614) 462-6981

ardous • waste • facility • approval • board

Richard F. Celeste, Governor
Robert H. Maynard, Chairman

November 21, 1983

RECEIVED
OHIO EPA

NOV 22 1983

DIV. HAZARDOUS
MATERIALS MANAGEMENT

Thomas R. Heaton
Borden Chemical, Printing Ink Div.
165 N. Washington Avenue
Columbus, Ohio 43215

Dear Mr. Thomas R. Heaton:

This correspondence acknowledges our receipt of the Board certified copy of the hazardous waste permit originally issued to your facility.

The permit (#03-48-0416^{14 JF}) is considered to be withdrawn at your request and therefore is no longer valid.

If you have any questions concerning your permit, please do not hesitate to contact me.

Sincerely,

Philbin L. Scott
Technical Advisor

PLS/dmc

cc: Tom Crepeau, Ohio EPA DHMM
Facility File

hazardous • waste • facility • approval • board

Richard F. Celeste, Governor
Robert H. Maynard, Chairman

RECEIVED
OHIO EPA

NOV 25 1983

DIV. HAZARDOUS
MATERIALS MANAGEMENT

Thomas R. Heaton
Borden Chemical, Printing Ink Div.
165 N. Washington Avenue
Columbus, Ohio 43215

Dear Mr. Thomas R. Heaton:

Please disregard our letter of November 21, 1983, as an erroneous permit number was used on that correspondence. This correspondence officially acknowledges our receipt of the Board certified copy of the hazardous waste permit originally issued to your facility.

The permit (#03-48-0146) is considered to be withdrawn at your request and therefore is no longer valid.

If you have any questions concerning your permit, please do not hesitate to contact me. I again apologize for the mistake.

Sincerely,



Philbin L. Scott
Technical Advisor

PLS/dmc

cc: Tom Crepeau, Ohio EPA DHMM
Facility File

File Borden
Van Wert
Lucas

hwfat

P.O. Box 1049
361 E. Broad St.
Columbus, Ohio 43216
(614) 462-6981

November 23, 1983

NW
SEP 28 1984

RECEIVED
OHIO EPA

OCT 23 1984

5HM-13

R.J. Ventres, Executive Vice President
Borden Chemical Company-
Printing Ink Division
180 East Broad Street
Columbus, Ohio 43215

DIV. of SOLID & HAZ. WASTE MGT

RE: Withdrawal of Part A
FACILITY NAME: Borden Chemical Company-
Printing Ink Division
U.S. EPA ID #: OHD 005-043-740

Dear Mr. Ventres:

This Agency has been advised by the Ohio Environmental Protection Agency (Ohio EPA) that the referenced facility is no longer operating as a storage facility under Federal rules. The facility's current status under the Resource Conservation and Recovery Act (RCRA) is that of a generator storing less than 90 days. This letter acknowledges your change in status.

Should you decide in the future to initiate storage of hazardous wastes for greater than 90 days, and such storage is consistent with the original Part A application, you must resubmit a Part A application within 30 days of such initiation.

Should you purpose to initiate storage of hazardous wastes in a manner inconsistent with the original Part A application, or to initiate the treatment or disposal of hazardous wastes, you must contact our office and the Ohio EPA at least ten days prior to such initiation. Based on the specifics of the proposed changes, we will advise you whether actual issuance of a permit is a prerequisite for such changes, or whether submittal of Part A and B of your application is sufficient. Failure to resubmit a Part A application, or to contact our office as mentioned above, would subject you to enforcement action. RCRA provides for civil penalties up to \$25,000 per violation.

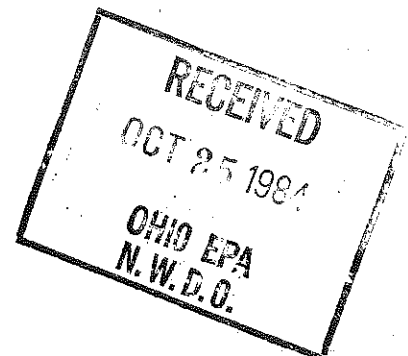
If you have questions, please contact Rebecca Strom of my staff, at (312) 886-6194, for assistance.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief
Waste Management Branch

cc: Tom Carlisle, Ohio EPA
~~Environmental Engineer~~
Environmental Engineer

Thomas H. Shadle,
Operations Manager



OhioEPA

Re: Lucas County
Hazardous Materials
Borden Chemical Printing Ink
HWFAB #03-48-0146

Mr. Thomas W. Shadle
Operations Manager
Borden Chemical Printing Ink
6725 Glead Street
Whitehouse, OH 43571

September 28, 1983

Dear Mr. Shadle:

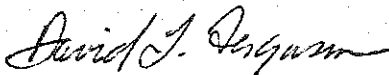
On August 30, 1983, I conducted an inspection of your facility for compliance with State of Ohio Hazardous Waste Regulations. As a formality, a Generator inspection was conducted pending final determination of your ink wash. No violations were found at that time. A copy of the inspection form is enclosed for your records. As I mentioned during the time of the inspection, Federal regulation numbers are used for reference only.

I questioned your IOC from F. Rosenbloom stating that your K086 ink wash is non-hazardous since K086 is a listed hazardous waste and normally requires a formal delisting from the U.S. EPA in Washington, D.C. I discussed this with Ken Humphrey, Technical Assistance, Central Office. Our determination is that the waste is non-hazardous only if it never had chrome or lead in it.

If this is the case, your facility will remain a Small Quantity Generator. If not, you must continue to maintain Generator status. There appears to be no problem for you to ship your waste within 90 days.

If you have any questions, please call me at 352-8461.

Sincerely,



David L. Ferguson
Division of Hazardous Materials Management

DLF/kb

Enclosure

cc: Paula Cotter, DHMM, CO

8-30-83 417
Date and Time of Inspection

RCRA INTERIM STATUS INSPECTION FORM

PART 1. GENERAL INFORMATION

HMFBAB # 03-48-0196

U.S. EPA I.D. # OH 005043740

Facility: Borden Chemical Printing Ink Address: 6725 Gilead St. City: Wadsworth

State: OH Zip Code: 43571 County: Lucas Telephone: 419-877-5392

INSPECTION PARTICIPANTS(S)

(Name)	(Title)	(Inspector(S))	(Telephone)
1. <u>Thomas W. Shadle</u>	<u>Operations Manager</u>	<u>W. of W. 2. Mark H. G. F.</u>	<u>419-877-5392</u>
2. _____	_____	_____	_____
3. _____	_____	_____	_____

INSTALLATION ACTIVITY

Mark One

If the site is a TSDF, check the boxes indicating which regulations are applicable.

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Generator only (G) | <input type="checkbox"/> General Facility Standards, Preparedness and Prevention, Contingency and Emergency, Manifests/Records/Reporting, Closure | <input type="checkbox"/> Waste Piles S03 |
| <input type="checkbox"/> Transporter (T) | <input type="checkbox"/> Containers S01 | <input type="checkbox"/> Land Treatment D81 |
| <input type="checkbox"/> TSDF only | <input type="checkbox"/> Tanks S02/T01 | <input type="checkbox"/> Landfills D80 |
| <input type="checkbox"/> G-T | <input type="checkbox"/> Surface Impoundments S04/T02 | <input type="checkbox"/> Chemical/Physical/Biological T04 |
| <input type="checkbox"/> G-TSDF | <input type="checkbox"/> Incineration/Thermal Treatment | <input type="checkbox"/> Groundwater Monitoring |
| <input type="checkbox"/> T-TSDF | | <input type="checkbox"/> Post-Closure |
| <input type="checkbox"/> T-TSDF | | |

RCRA INTERIM STATUS INSPECTION FORM

Yes	No	N/A	Remark #
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. Has the facility submitted a Part A to Ohio?
2. If "yes", is it complete and accurate?
3. Has the facility submitted a Part B?

REMARKS, PART 1. GENERAL INFORMATION

Include a brief description of site activity and waste handling.

This Facility will now be classified a SQG.

It no longer uses Cr or Cd in its pigments as before when it had a permit for HQSL. Occasional S.Q. solvents.

A generation inspection was done to finalize and verify the permit withdrawal. 90 days is no problem.

No waste on site.

See Cover letter for further explanation.

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

Subpart C: Preparedness and Prevention

1. Has there been a fire, explosion or non-planned release of hazardous waste at this facility? (265.31) _ ☒ _

2. If required due to actual hazards associated with the waste material, the facility has the following equipment: (265.32)
 - a) Internal alarm system. _ ☒ _
 - b) Access to telephone, radio or other device for summoning emergency assistance. _ ☒ _
 - c) Portable fire control equipment. _ ☒ _
 - d) Water at adequate volume and pressure via hoses sprinkler, foamers or sprayers. _ ☒ _

3. All required safety, fire and communications equipment is tested and maintained as necessary; testing and maintenance are documented. (265.33) _ ☒ _

4. If required due to the actual hazards associated with the waste material, personnel have immediate access to an emergency communication device during times when hazardous waste is being physically handled. (265.34) _ ☒ _

5. If required due to the actual hazards associated with the waste material, adequate aisle space to allow unobstructed movement or emergency or spill control equipment is maintained. (265.35) _ ☒ _

6. If required due to the actual hazards associated with the waste material, the facility has attempted to make appropriate arrangements with local emergency service authorities to familiarize them with the possible hazards and the facility layout. (265.37(a)) _ ☒ _

7. Where state or local emergency service authorities have declined to enter into any proposed special arrangements or agreements the refusal has been documented. (265.37(b)) _ ☒ _

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

Subpart D: Contingency and Emergency

1. The facility has a written Contingency Plan designed to minimize hazards from fires, explosions or unplanned releases of hazardous wastes (265.51) and contains the following components:

- a) Actions to be taken by personnel in the event of an emergency incident. ☒ ☐ ☐
- b) Arrangements or agreements with local or state emergency authorities. ☒ ☐ ☐
- c) Names, addresses and telephone numbers of all persons qualified to act as emergency coordinator. ☒ ☐ ☐
- d) A list of all emergency equipment including location, physical description and outline of capabilities. ☒ ☐ ☐
- e) If required due to the actual hazards associated with the waste(s) handled, an evacuation plan for facility personnel. (265.51(f)) ☐ ☒ ☐

2. A copy of the Contingency Plan and any plan revisions is maintained on-site and has been submitted to all local and state emergency service authorities that might be required to participate in the execution of the plan. (265.53) ☒ ☐ ☐

3. The plan is revised in response to facility, equipment and personnel changes or failure of the plan. (265.54) ☒ ☐ ☐

4. An emergency coordinator is designated at all times (on-site or on-call) is familiar with all aspects of site operation and emergency procedures and has the authority to implement all aspects of the Contingency Plan. (265.56) ☒ ☐ ☐

5. If an emergency situation has occurred, the emergency coordinator has implemented all or part of the Contingency Plan and has taken all of the actions and made all of the notifications deemed necessary under Sections 265.56. ☐ ☒ ☐

PART 2. GENERATOR REQUIREMENTS

	Yes	No	N/A	Remark #
1. The hazardous waste(s) generated at this facility have been tested or are acknowledged to be hazardous waste(s) as defined in Section 261 and in compliance with the requirements of Sections 262.11.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Does this facility generate any hazardous wastes that are excluded from regulation under Section 261.4 (statutory exclusions) or Section 261.6 (recycle/reuse)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Does this facility have waste or waste treatment equipment that is excluded from regulation because of totally enclosed treatment (Section 265.1(c)(9)) or via operation of an elementary neutralization unit and/or wastewater treatment unit (Section 265.1(c)(10)).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. The generator meets the following requirements with respect to the preparation, use and retention of the hazardous waste manifest:				
a) The manifest form used contains all of the information required by Section 262.21(a) and (b) and the minimum number of copies required by Section 262.22.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b) The generator has designated at least one permitted disposal facility and has/will designate an alternate facility or instructions to return waste in compliance with Section 262.20.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c) Prepared manifests have been signed by the generator and initial transporter in compliance with Section 262.23.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d) The generator has complied with manifest exception reporting requirements (investigate after 35 days, report after 45 days) in Section 262.42(a), (b)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
e) Signed copies of all hazardous waste manifests and any documentation required for Exception Reports are retained for at least 3 years as required by Section 262.40.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

RCRA INTERIM STATUS INSPECTION FORM

Yes No N/A Remark #

5. The generator meets the following hazardous waste pre-transport requirements:

a) Prior to offering hazardous wastes for transport off-site the waste material is packaged, labeled and marked in accord with applicable DOT regulations (Section 262.30, 262.31 and 262.32(a))

b) Prior to offering hazardous wastes for transport off-site each container with a capacity of 110 gallons (416 liters) or less is affixed with a completed hazardous waste label as required by Section 262.32(b).

c) The generator meets requirements for properly placarding or offering to properly placard the initial transporter of the waste material in compliance with Section 262.33.

6. Hazardous wastes imported from or exported to foreign countries are handled in accordance with the requirements of Section 262.50.

7. If the generator elects to store hazardous waste on-site in containers or tanks for 90 days or less without a RCRA storage permit as provided under Section 262.34, the following requirements with respect to such storage are met:

a) The containers are clearly marked with the words "Hazardous Waste".

b) The date that accumulation began is clearly marked on each container.

8. The generator has provided a Personnel Training Program in compliance with Section 265.16(a)(b)(c) including instruction in safe equipment operation and emergency response procedures, training new employees within 6 months and providing an annual training program refresher course (Section 262.34).

9. The generator keeps all of the records required by Section 265.16(d)(e) including written job titles, job descriptions and documented employee training records (Section 262.34).

RCRA INTERIM STATUS INSPECTION FORM

NOTE : SHORT-TERM STORAGE FOR 90 DAYS OR LESS IN TANKS AND CONTAINERS ALSO REQUIRES THAT REGULATIONS IN SECTION 265, SUBPARTS C AND D (PREPAREDNESS AND PREVENTION PLUS CONTINGENCY AND EMERGENCY) AND CERTAIN PORTIONS OF THE "CONTAINERS" AND "TANKS" RULES BE MET. COMPLETE THE APPROPRIATE SECTIONS OF THE INSPECTION FORM.

REMARKS, PART 2. GENERATOR REQUIREMENTS



**INTER-COMPANY AND
OFFICE CORRESPONDENCE**

FEB 7 REC'D

File
FORM B-316 (1/81)

Lucas
HW

TO: TOM SHADLE - WHITEHOUSE

DATE: February 3, 1983

FROM: F. Rosenbloom

DIV./DEPT. Graphics Division

ADDRESS: Woodlawn

SUBJECT: WASTE DISPOSAL

TELEPHONE: Ext. 6282

I reviewed the regulations and based upon the analysis of your waste material, your product mix and the now accepted U.S. EPA interpretation of K-086 (into wash waste) that we can consider your water waste non-hazardous.

By definition, then, we can call it an "ink waste" and we will not be required to manifest its disposal.

Please provide me with the name and address of the disposal site so that suitable checks can be made on the company you plan to use. Upon approval, you can then start shipping the waste at the reduced cost you've been able to negotiate.

F. Rosenbloom

FR:nd

cc: W. B. Barton
T. Heaton
P. Semadeni
G. Sickinger
G. Starkey
J. Warren

Lucas
Hw
Borden

General Oil Company



12680 Beech Daly Rd. - Detroit

Michigan 48239

535-2530

August 24, 1983

.Borden Chemical
.6725 Gilead St.
.Whitehouse, Ohio 43571
.ATTN: TOM SHADEL

RE: WASTE INK WASHWATER
GOC Waste Code: 10031

Dear Mr. Shadel:

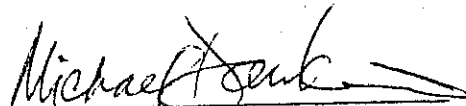
I am pleased to inform you that the waste material listed above has been approved for processing at General Oil Company, based on the Waste Stream Characterization submitted on August 13, 1983.

As you will note, a GOC Waste Code number has been assigned to this material. This number should appear in the comments section of the State of Michigan Waste Disposal Manifest accompanying all shipments.

If I can be of any further assistance, please don't hesitate to contact me.

Best Regards,

GENERAL OIL COMPANY, INC.


Michael Dawkins

MD:zfd

BORDEN CHEMICAL
DIVISION OF BORDEN INC.



March 21, 1983

Chem Met
18550 Allen Road
P. O. Box 2169
Wyandotte, Michigan 48192

Attention: Mr. W. Hartman

Dear Mr. Hartman:

Cousins Waste Control will be delivering approximately 1000 gallon of waterbased ink wash which contains up to but not exceeding 10% by weight of perchloroethylene. This is not a normal component of our waste but was inadvertently mixed in after it was used for some special cleaning of our equipment. This should be the only time that this will occur and I am advising you in advance since there are trace amounts in this particular shipment.

Sincerely,

THE BORDEN CHEMICAL COMPANY
PRINTING INK DIVISION

Thomas W. Shadle,
Operations Manager

TWS/cb

WDO

hazardous • waste • facility • approval • board

James A. Rhodes, Governor
Wayne S. Nichols, Chairman

hwfab

P.O. Box 1049
361 E. Broad St.
Columbus, Ohio 43216
(614) 462-6981

M E M O R A N D U M

RECEIVED
OHIO EPA

SEP 14 1982

DIV. HAZARDOUS
MATERIALS MANAGEMENT

TO: Tom Crepeau, Mgr. P & MRS/DHMM
FROM: *R.D.* Bob Fragale, Technical Advisor
DATE: September 14, 1982
SUBJECT: DHMM PROCESSING OF ATTACHED PERMIT MODIFICATION
REQUESTS

Attached please find the following existing facility permit
modification requests requiring DHMM review, concurrence and/or
recommendation:

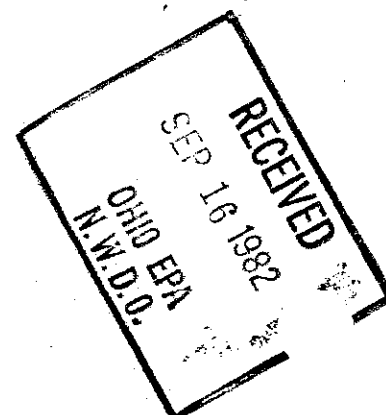
<u>FACILITY</u>	<u>PERMIT NO.</u>	<u>TYPE</u>
ITT Powersystems Division	03-17-#0141	MO
Borden Chemical-Printing Ink Div.	03-18-#0146	MO - permit modification
Erieway Pollution Control	02-13-#0387	MO
General Tire & Rubber Co.-Bryan	03-86-#0497	MO - and - 04-10-1 - it let permit

Thank you for your attention to this matter. Should you have any
questions or concerns, please feel free to contact me at your
convenience.

BF/ss

Attachment

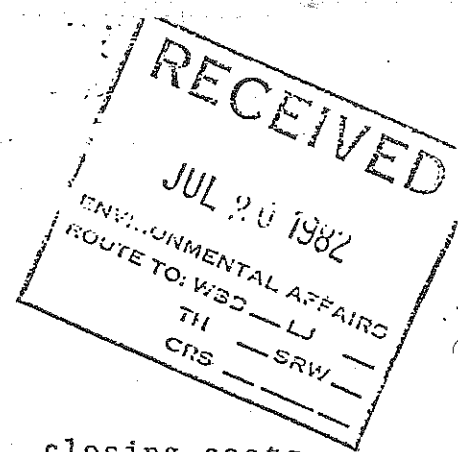
cc: Paul Flanigan/DHMM
Paula Cotter/DHMM
File



Borden-Lucas

CLOSURE COST ESTIMATE

REVISED 12 JULY 82



Due to a product changeover at this location, closing costs are revised downward from our original estimate dated August 1981.

The current product line is a water-base system. All lead chromium and cadmium pigments have been eliminated from use. The waste system, by analysis, is not considered EP Toxic.

Closure will follow the original plan which includes properly cleaning all equipment including dust collectors, pumps, tanks, mills, and piping, etc. Any drum storage will be disposed of in an approved manner. Any spillage or penetration into the land surface will be removed and disposed of at an approved landfill. An independent registered professional engineer will be retained to certify correct closure has been accomplished.

The total revised closure cost estimate is \$20,000.

A letter of financial assurance will be available from our corporate offices.

Thomas W. Shadle,
Manager

Borden Chemical Company
Printing Ink Division
Whitehouse, Ohio

FORM 1		U.S. ENVIRONMENTAL PROTECTION AGENCY		I. EPA I.D. NUMBER	
GENERAL		GENERAL INFORMATION		GENERAL INSTRUCTIONS	
LABEL ITEMS		Consolidated Permits Program (Read the "General Instructions" before starting.)		If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, mark through it and enter the correct one in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	
I. EPA I.D. NUMBER		PLEASE PLACE LABEL IN THIS SPACE		F O H D 0 0 5 0 4 3 7 4 0	
III. FACILITY NAME					
V. FACILITY MAILING ADDRESS					
VI. FACILITY LOCATION					
II. POLLUTANT CHARACTERISTICS					
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.					
SPECIFIC QUESTIONS		MARK 'X'		SPECIFIC QUESTIONS	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		YES	NO	FORM ATTACHED	B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)
			X		
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)			X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)
			X		
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)
		X		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)			X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)
			X		
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)			X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)
			X		
III. NAME OF FACILITY					
1 Borden Chemical Printing Ink					
IV. FACILITY CONTACT					
A. NAME & TITLE (last, first, & title)			B. PHONE (area code & no.)		
2 Shadle, TW Lab Production Mgr.			4 1 9 8 7 7 5 3 9 2		
V. FACILITY MAILING ADDRESS					
A. STREET OR P.O. BOX					
3 6 7 2 5 Gilead Street					
B. CITY OR TOWN					
4 Whitehouse					
C. STATE					
OH					
D. ZIP CODE					
4 3 5 7 1					
VI. FACILITY LOCATION					
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER					
5 Same					
B. COUNTY NAME					
LUCAS					
C. CITY OR TOWN					
6					
D. STATE					
OH					
E. ZIP CODE					
4 3 5 7 1					
F. COUNTY CODE (if known)					

CONTINUED FROM THE FRONT

II. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
2	8	9	3	(specify)	7		(specify)
Printing Ink							
C. THIRD				D. FOURTH			
7				(specify)	7		(specify)

III. OPERATOR INFORMATION

A. NAME															B. Is the name listed in Item VIII-A also the owner?	
Borden Inc															<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)															D. PHONE (area code & no.)	
F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P = PRIVATE															614 225 4000	
E. STREET OR P.O. BOX																
180 E. Broad Street																
F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND		
Columbus										OH		43215		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
9 N										9 P									
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
9 U										(specify) Misc. State Permits									
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
9 R										(specify)									

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The mixing, blending and dispersing of colorants into printing inks and servicing of the printing industry.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. E & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
Art W. Gutheil, President Borden Chemical				11/17/80	

COMMENTS FOR OFFICIAL USE ONLY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

RCRA
EPA
U.S. ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER
FOH D 0 0 5 0 4 3 7 4 0

FOR OFFICIAL USE ONLY
APPLICATION APPROVED DATE RECEIVED (yr., mo., & day)
COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)
1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)
2. NEW FACILITY (Complete item below.)
FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)
FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.
1. AMOUNT - Enter the amount.
2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

DUP
X-1 S 0 2 600 G
X-2 T 0 3 20 E
1 S 0 1 100 U
2 S 0 2 100 U
3
4
5
6
7
8
9
10

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS P
TONS T

METRIC UNIT OF MEASURE CODE
KILOGRAMS K
METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO. JZ	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES									
							1. PROCESS CODES (enter)					2. PROCESS DESCRIPTION (if a code is not entered in D(1))				
X-1	K	0	5	4	900	P	T	0	3	D	8	0				
X		0	0	2	400	P	T	0	3	D	8	0				
X-3	D	0	0	1	100	P	T	0	3	D	8	0				
X-4	D	0	0	2												included with above

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

EPA I.D. NUMBER (enter from page 1)															FOR OFFICIAL USE ONLY									
<div> <div>W O H D O O 5 0 4 3 7 4 0</div> <div>1</div> </div>															<div> <div>W</div> <div>DUP</div> <div>2</div> <div>DUP</div> </div>									
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)															D. PROCESSES									
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))												
				27	28	29	30	31	32	33	34													
1	K 0 8 6	54,000	P	S	0	1	S	0	2															
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26																								

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)

5	F	0	H	D	0	0	5	0	4	3	7	4	0	6
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

63	64	65	66	67	68	69	70	71
4	1	3	1	0	5	0		

LONGITUDE (degrees, minutes, & seconds)

72	73	74	75	76	77	78
0	8	3	4	8	0	3

VIII. FACILITY OWNER☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

17	18
E	Borden Inc

2. PHONE NO. (area code & no.)

53	54	55	56	57	58	59	60	61	62
6	1	4	-	2	2	5	-	4	2

3. STREET OR P.O. BOX

19	20
F	180 E Broad St.

4. CITY OR TOWN

43	44	45	46
G	Columbus		

5. ST.

47	48	49
OH		

6. ZIP CODE

50	51	52	53	54	55
4	3	2	1	5	

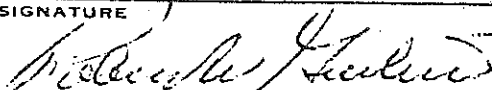
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

Robert W. Gulheil, President
Borden Chemical

B. SIGNATURE



C. DATE SIGNED

11/17/80

X. OPERATOR CERTIFICATION

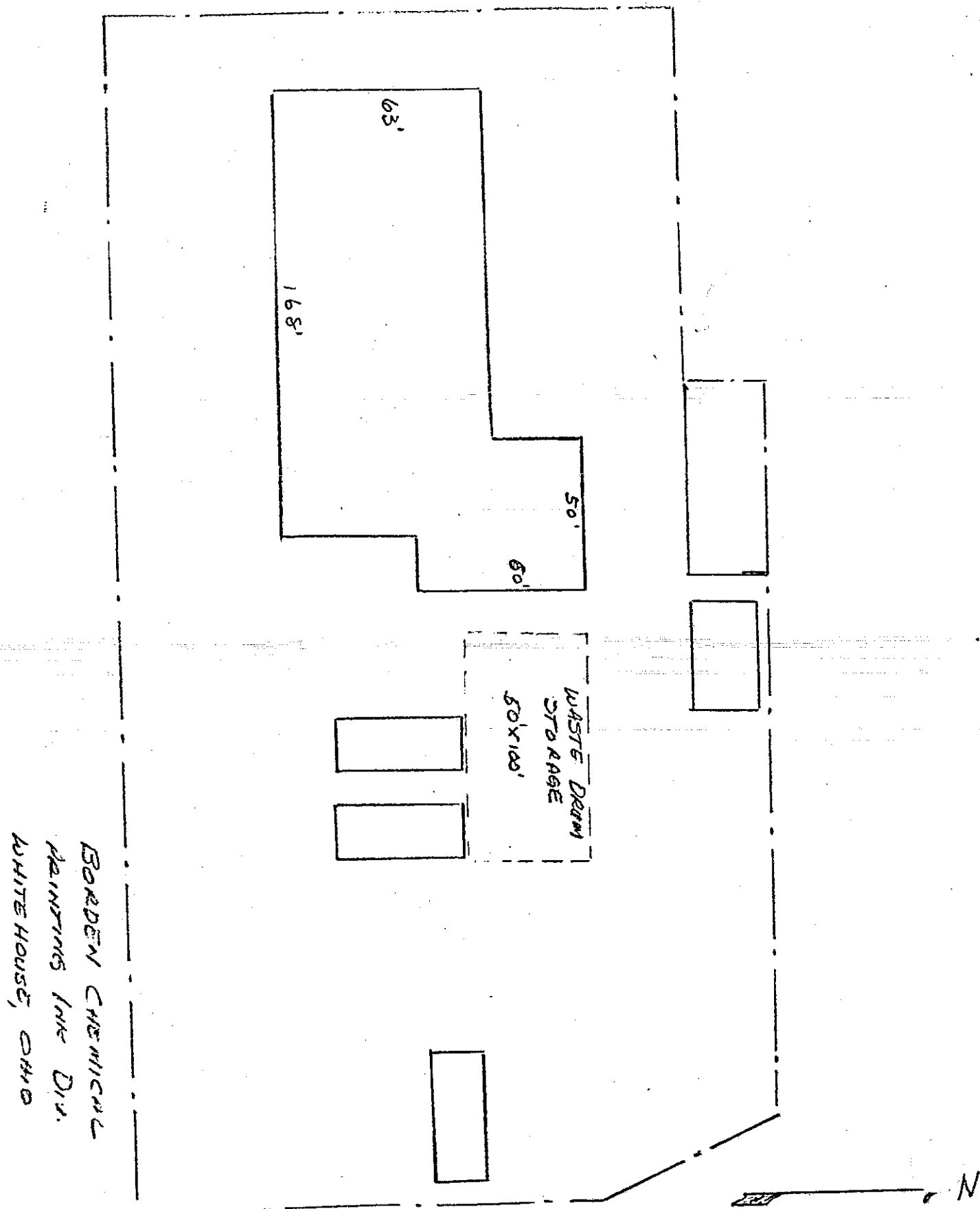
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

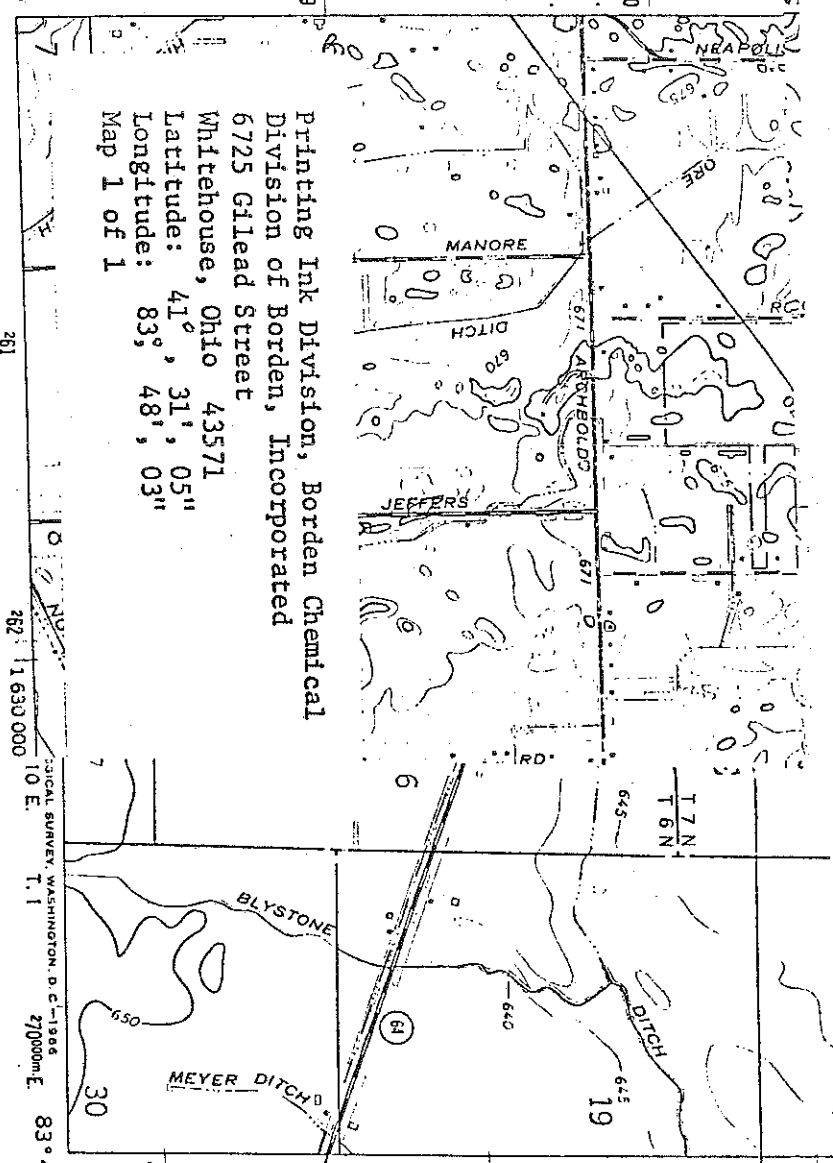
C. DATE SIGNED

V. FACILITY DRAWING (see page 4)



41°30'
83°52'30"

(COLTON)
4266 IV NW



Printing Ink Division, Borden Chemical
Division of Borden, Incorporated
6725 Gilead Street
Whitehouse, Ohio 43571
Latitude: 41° 31' 05"
Longitude: 83° 48' 03"
Map 1 of 1

261

262 11630000

10 E. T. 1
SOCIAL SURVEY WASHINGTON, D. C. - 1966
2700000 E.

41°30'
83°45'

3AD CLASSIFICATION

Light-duty
Unimproved dirt
U.S. Route
State Route

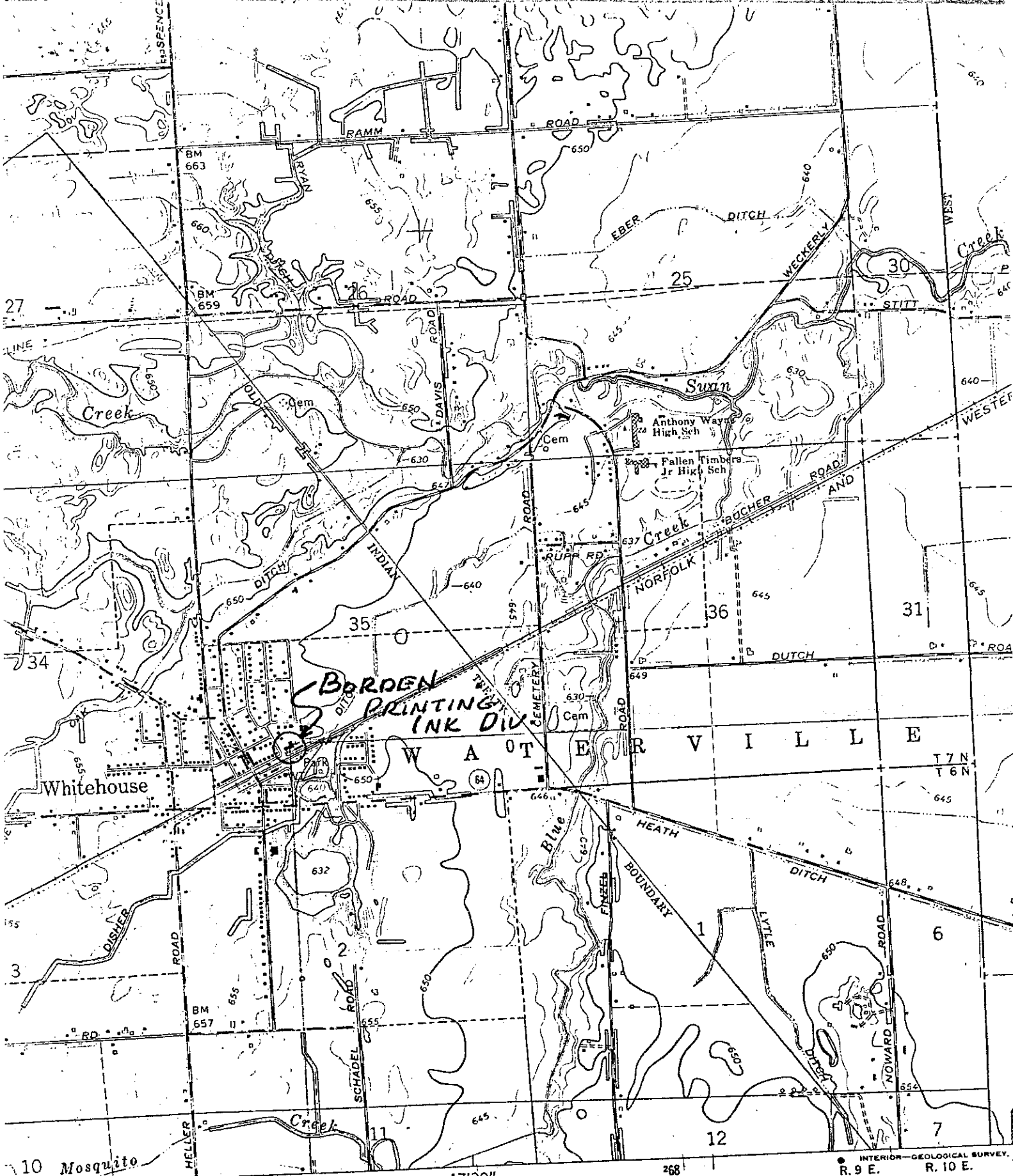
Mapped, edited, and published by the Geological Survey
Control by USGS and USC&GS
Topography by planetable surveys 1925. Revised 1964
Polyconic projection. 1927 North American datum
10,000-foot grid based on Ohio coordinate system, north zone
1000-meter Universal Transverse Mercator grid ticks,
zone 17, shown in blue
Land lines south of Fulton Line based on the First Principal Meridian
Land lines north of Fulton Line based on the Michigan Meridian
Fine red dashed lines indicate selected fence and field lines where
generally visible on aerial photographs. This information is unchecked

WHITEHOUSE, OHIO
SE/4 SWANTON 15' QUADRANGLE
N4130-WB345/7.5
1964

AMS 4267 III SE-SERIES V852

4266 I NW
BOWLING GREEN
NORTH

41° 31' 05"



10 Mosquito

(GRAND RAPIDS) 4266 IV NE

SCALE 1:24 000

63° 48' 03"

1.7 MI. TO OHIO 570

47° 30"

268

INTERIOR-GEOLOGICAL SURVEY. R. 9 E. R. 10 E.

R ASS

Heavy-duty

Medium-duty

Interstate Route

0 2000 3000 4000 5000 6000 7000 FEET

0 1 KILOMETER

CLOSURE AND POST-CLOSURE PLAN

FOR

BORDEN CHEMICAL COMPANY

6725 GILEAD STREET, P. O. BOX 2758

WHITEHOUSE, OHIO 43571

I. General Closure Considerations

- A. This facility consists of interdependent manufacturing processes; thus closure will occur as a unit.
- B. The facility will close upon some future closing date as yet undetermined. Closure will be completed within 90 days of generating the last volume of hazardous waste.
- C. The maximum quantity of waste in storage or treatment at any given time will not exceed process design capacities (specified on page 1, form 3, RCRA hazardous waste permit application).
- D. The facility equipment will be triple rinsed with an appropriate solvent. The residue will be properly disposed of as hazardous waste.

II. General Post-Closure Activities

- A. Security will be maintained by fence around the facility with a monthly inspection of the area.
- B. The location, quantity and type of hazardous waste at the facility will be documented by the current RCRA permit application and record keeping of subsequent activity. Any movement of hazardous waste within or from the facility will be recorded.
- C. No food chain crop will be permitted on the RCRA facility, unless no impact can be determined.
- D. These activities will continue after closure with a time that the Regional Administrator determines is sufficient.

III. Specific Closure and Post-Closure Activities for Facility

A. Drums.

- 1. Full drums will be transported for proper disposal.
- 2. Empty drums in which hazardous materials have been stored will be triple rinsed with an appropriate solvent.
- 3. Leaking drums of hazardous material will be enclosed in an over-pack drum for disposal.

- B. All equipment including pumps, tanks, mills and piping will be triple rinsed with the residue being properly disposed of.

IV. Cost Estimates

- A. Closure cost estimates - \$60,000 (labor
(material
(transportation and disposal
- B. Post-closure costs \$25,000 (monitoring
(transportation and disposal
(contingency
- C. The cost estimates will be revised upon any change in the closure or post-closure plans.
- D. The cost estimates will be revised at least once annually using the current inflation factor.

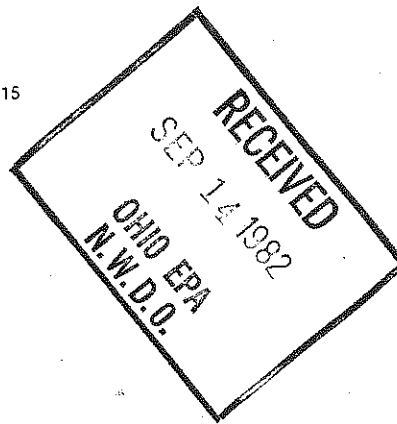
V. Final Considerations

- A. These plans will be amended upon a change in the operating plans.
- B. These plans will be submitted to the Regional Administrator 180 days prior to anticipated closure of the facility.
- C. An independent registered professional engineer will be contracted to certify that the facility has been closed in accordance with the approved closure plan.

BORDEN INC

180 EAST BROAD STREET, COLUMBUS, OHIO 43215

September 9, 1982



THOMAS R. HEATON
ENVIRONMENTAL SPECIALIST
ENVIRONMENTAL AFFAIRS

USEPA Region V
RCRA Activities
P.O. Box A3587
Chicago, IL 60690-3587

Attn: Ms. Kathleen Homer

Re: Borden Chemical, Printing Ink Division
Whitehouse, OH EPA ID#OHD005043740

Dear Ms. Homer:

For the referenced facility, Borden Inc. requests the withdrawal of its permit application (enclosed) for drum storage of hazardous waste. Production activity at this site will not cease, however Borden submits closure details for the drum storage area. The original permit application indicated hazardous waste storage in a tank (SO2), which was never used. Generator status will be maintained.

The complete closure plan is enclosed. The aspects of the closure plan which are pertinent to this correspondence are those relative to drum storage area closure. The drummed waste will be disposed of properly. Future storage of drums will not exceed ninety (90) days. No spills of hazardous waste have occurred, hence soil excavation and disposal is not necessary.

Other details of the closure plan include the disposal of decontamination wash waters, the disposal of dust collector residue, etc. Since the plant will continue to operate, these actions are superfluous.

Please respond in writing to acknowledge the change in status at this facility. If you have any questions, please call the undersigned at (614) 225-4860.

Sincerely,

Thomas R. Heaton

TRH/slw

Enclosure

cc: Hazardous Waste Facility Approval Board
David L. Ferguson, Ohio EPA, Northwest District Office

Ohio EPA

Re: Lucas County
Hazardous Materials
Borden Chemical Printing Ink
HWFAB #03-48-146

Thomas W. Shadle
Plant Manager
6725 Gilead Street
Whitehouse, OH 43571

September 2, 1982

Dear Mr. Shadle:

On June 28, 1982, I conducted a RCRA Interim Status Standards inspection of your facility which was represented by you. The facility was found to be in compliance with all applicable State and Federal regulations.

(You are hereby advised) that total compliance with the regulations contained in 40 CFR 265 is required as a condition of continuing interim status with the U.S. EPA. Failure to list specific deficiencies in this communication does not relieve you from the responsibility of complying with all applicable regulations.

A copy of the form completed during the inspection is enclosed. If you have any questions about the inspection, please call me at 352-8461.

Sincerely,



David L. Ferguson
Environmental Scientist

DLF/kb

Enclosure

cc: Kathy Homer, U.S. EPA, Region V w/encl.
cc: Paula Cotter, DHM, CO w/encl.

Ohio EPA

Re: Lucas County
Hazardous Materials
Borden Chemical Printing Ink
HWFAB #03-48-146

Thomas W. Shadle
Plant Manager
6725 Gilead Street
Whitehouse, OH 43571

September 2, 1982

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A copy of the form completed during the inspection is enclosed. If you have any questions about the inspection, please call me at 352-8461.

Sincerely,



David L. Ferguson
Environmental Scientist

DLF/kb

Enclosure

cc: Kathy Homer, U.S. EPA, Region V w/encl.
cc: Paula Cotter, DHM, CO w/encl.

MODIFICATION LOG SHEET

0146

FACILITY NAME	DATE RECEIVED	TYPE	DATE TO DHMM	PUBLIC NOTICE DATE
---------------	---------------	------	--------------	--------------------

Borden Chemical 9-10-82 MO 9-14-82
 Printing Ink Div.

RECEIVED
 OHIO EPA

SEP 14 1982

DIV. HAZARDOUS
 MATERIALS MANAGEMENT

REPORT RECEIVED	DHMM RECOMMENDATION	BOARD REVIEW DATE	BOARD ACTION
-----------------	---------------------	-------------------	--------------

COMMENTS

Request to terminate permit

BORDEN INC

180 EAST BROAD STREET, COLUMBUS, OHIO 43215

RECEIVED
STATE OF OHIO



September 9, 1982

1982 SEP 10 P 12:06

HAZARDOUS WASTE FACILITY
APPROVAL BOARD

THOMAS R. HEATON
ENVIRONMENTAL SPECIALIST
ENVIRONMENTAL AFFAIRS

USEPA Region V
RCRA Activities
P.O. Box A3587
Chicago, IL 60690-3587

Attn: Ms. Kathleen Homer

Re: Borden Chemical, Printing Ink Division
Whitehouse, OH EPA ID#OHD005043740

Dear Ms. Homer:

For the referenced facility, Borden Inc. requests the withdrawal of its permit application (enclosed) for drum storage of hazardous waste. Production activity at this site will not cease, however Borden submits closure details for the drum storage area. The original permit application indicated hazardous waste storage in a tank (SO2), which was never used. Generator status will be maintained.

The complete closure plan is enclosed. The aspects of the closure plan which are pertinent to this correspondence are those relative to drum storage area closure. The drummed waste will be disposed of properly. Future storage of drums will not exceed ninety (90) days. No spills of hazardous waste have occurred, hence soil excavation and disposal is not necessary.

Other details of the closure plan include the disposal of decontamination wash waters, the disposal of dust collector residue, etc. Since the plant will continue to operate, these actions are superfluous.

Please respond in writing to acknowledge the change in status at this facility. If you have any questions, please call the undersigned at (614) 225-4860.

Sincerely,

Thomas R. Heaton

Thomas R. Heaton

TRH/slw

Enclosure

RECEIVED
OHIO EPA

SEP 14 1982

DIV. HAZARDOUS
MATERIALS MANAGEMENT

cc: Hazardous Waste Facility Approval Board
David L. Ferguson, Ohio EPA, Northwest District Office

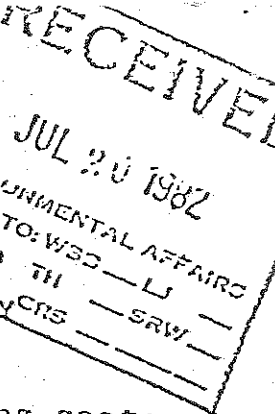
CLOSURE COST ESTIMATE

REVISED 12 JULY 82

RECEIVED
STATE OF OHIO

1982 SEP 10 P 12:06

HAZARDOUS WASTE FACILITY
APPROVAL BOARD



Due to a product changeover at this location, closing costs are revised downward from our original estimate dated August 1981.

The current product line is a water-base system. All lead chromium and cadmium pigments have been eliminated from use. The waste system, by analysis, is not considered EP Toxic.

Closure will follow the original plan which includes properly cleaning all equipment including dust collectors, pumps, tanks, mills, and piping, etc. Any drum storage will be disposed of in an approved manner. Any spillage or penetration into the land surface will be removed and disposed of at an approved landfill. An independent registered professional engineer will be retained to certify correct closure has been accomplished.

The total revised closure cost estimate is \$20,000.

A letter of financial assurance will be available from our corporate offices.

RECEIVED
OHIO EPA

SEP 14 1982

DIV. HAZARDOUS
MATERIALS MANAGEMENT

Thomas W. Shadle,
Manager

Borden Chemical Company
Printing Ink Division
Whitehouse, Ohio

RECEIVED
STATE OF OHIO

SEP 10 12 06

- B. All equipment including pumps, tanks, mills and piping will be triple rinsed with the residue being properly disposed.

IV. Cost Estimates

HAZARDOUS WASTE FACILITY
APPROVAL BOARD

- A. Closure cost estimates - \$60,000 (labor
(material
(transportation and disposal
- B. Post-closure costs \$25,000 (monitoring
(transportation and disposal
(contingency
- C. The cost estimates will be revised upon any change in the closure or post-closure plans.
- D. The cost estimates will be revised at least once annually using the current inflation factor.

V. Final Considerations

- A. These plans will be amended upon a change in the operating plans.
- B. These plans will be submitted to the Regional Administrator 180 days prior to anticipated closure of the facility.
- C. An independent registered professional engineer will be contracted to certify that the facility has been closed in accordance with the approved closure plan.

RECEIVED
OHIO EPA

SEP 14 1982

DIV. HAZARDOUS
MATERIALS MANAGEMENT

() SURE AND POST-CLOSURE PLAN

RECEIVED

OHIO EPA

FOR

RECEIVED
STATE OF OHIO

BORDEN CHEMICAL COMPANY

1982 SEP 10 P 12:06

SEP 14 1982

6725 GILEAD STREET, P. O. BOX 2758 HAZARDOUS WASTE FACILITY
APPROVAL BOARD

DIV. HAZARDOUS
MATERIALS MANAGEMENT

WHITEHOUSE, OHIO 43571

I. General Closure Considerations

- A. This facility consists of interdependent manufacturing processes; thus closure will occur as a unit.
- B. The facility will close upon some future closing date as yet undetermined. Closure will be completed within 90 days of generating the last volume of hazardous waste.
- C. The maximum quantity of waste in storage or treatment at any given time will not exceed process design capacities (specified on page 1, form 3, RCRA hazardous waste permit application).
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II. General Post-Closure Activities

- A. Security will be maintained by fence around the facility with a monthly inspection of the area.
- B. The location, quantity and type of hazardous waste at the facility will be documented by the current RCRA permit application and record keeping of subsequent activity. Any movement of hazardous waste within or from the facility will be recorded.
- C. No food chain crop will be permitted on the RCRA facility, unless no impact can be determined.
- D. These activities will continue after closure with a time that the Regional Administrator determines is sufficient.

III. Specific Closure and Post-Closure Activities for Facility

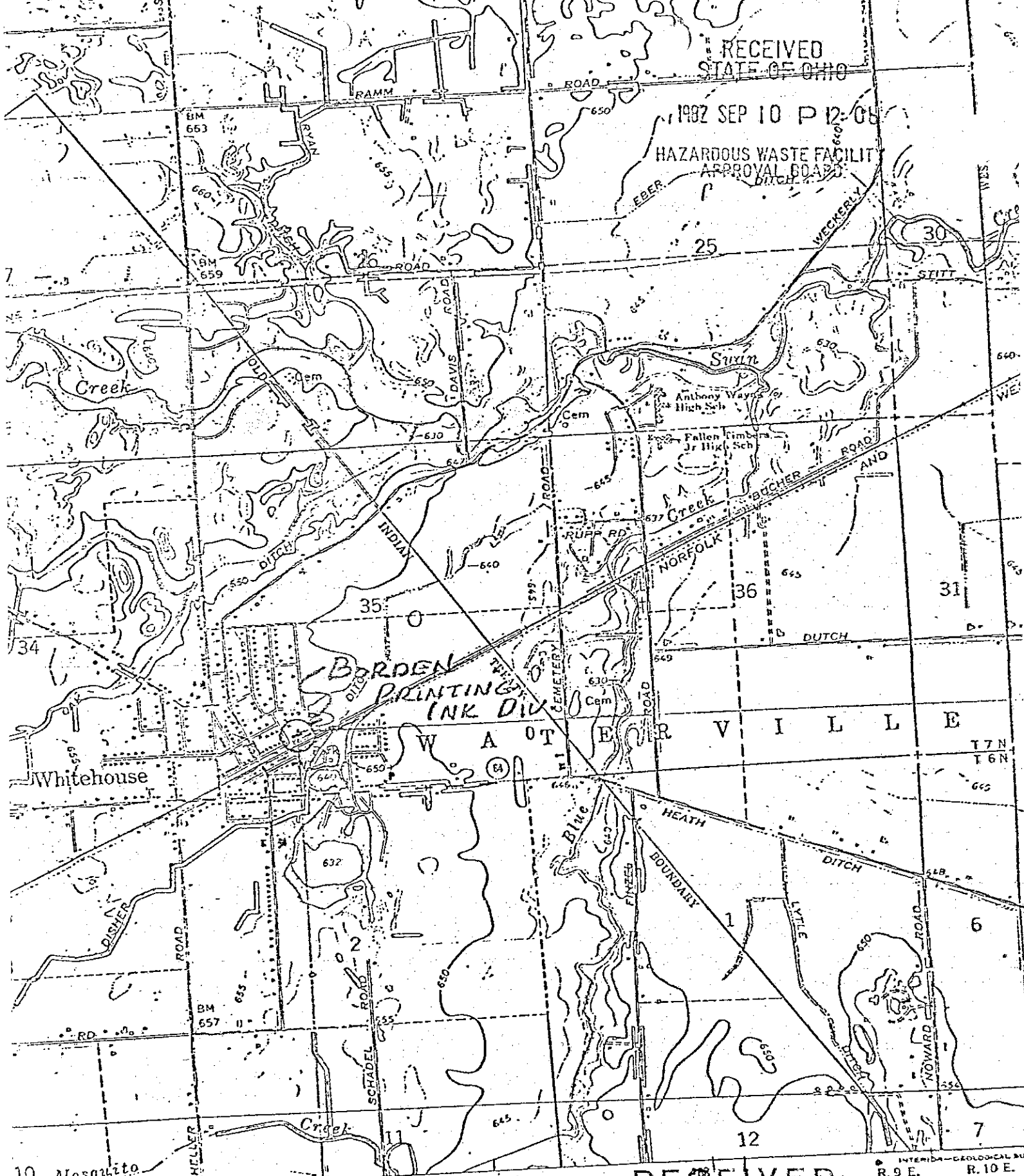
A. Drums.

- 1. Full drums will be transported for proper disposal.
- 2. Empty drums in which hazardous materials have been stored will be triple rinsed with an appropriate solvent.
- 3. Leaking drums of hazardous material will be enclosed in an over-pack drum for disposal.

RECEIVED
STATE OF OHIO

1982 SEP 10 P 12:08

HAZARDOUS WASTE FACILITY
APPROVAL BOARD



BORDEN
PRINTING
INK DIV

WATERVILLE

RECEIVED
OHIO EPA

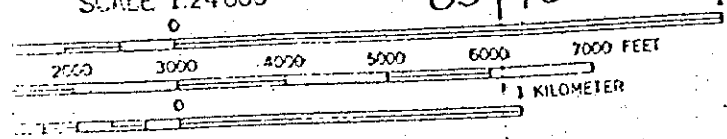
SEP 14 1982

DIV. HAZARDOUS
MATERIALS MANAGEMENT

Heavy-duty
Medium-duty
Interstate Route

(GRAND RAPIDS)
4268 IV NE
SCALE 1:24 000

63° 48' 03"

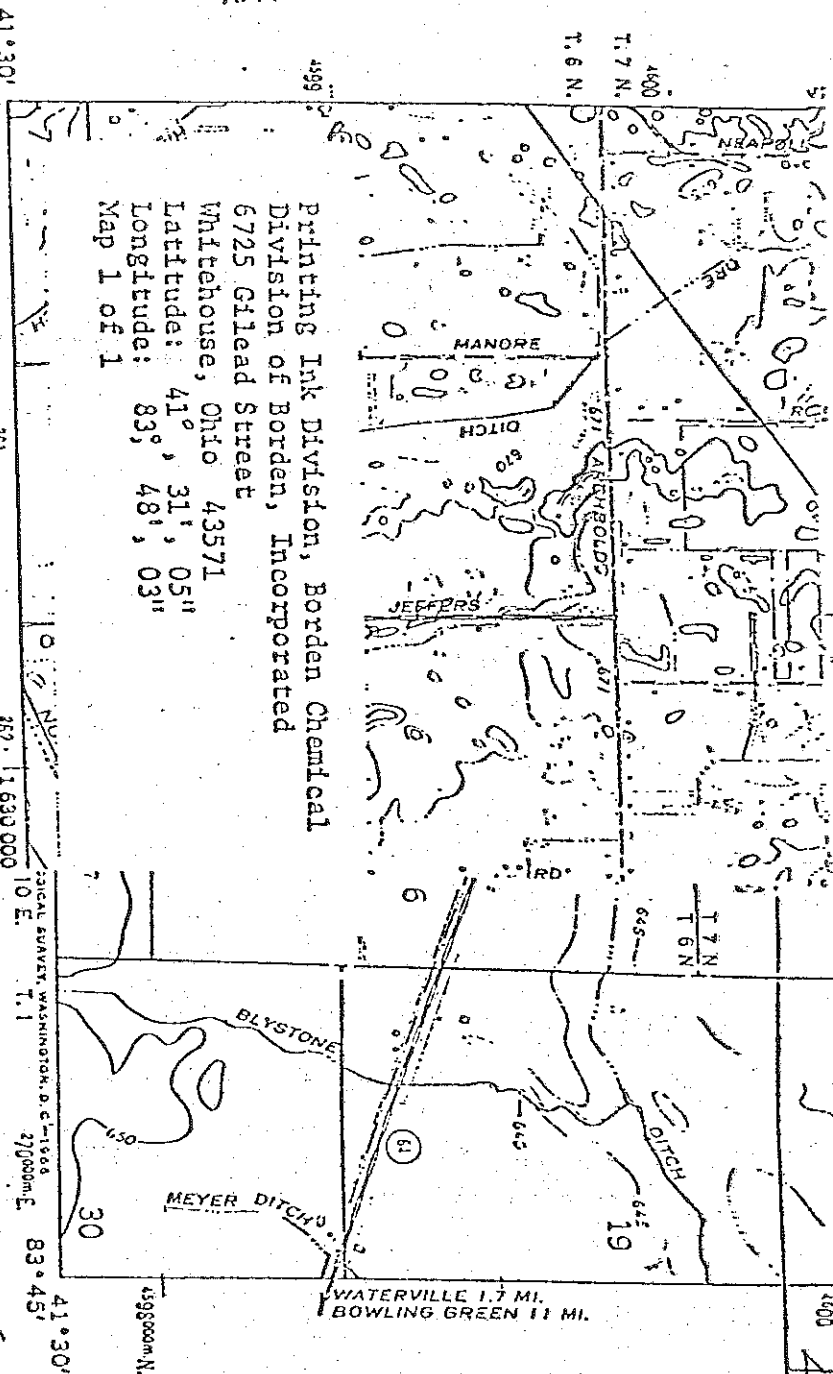


INTERIOR-GEOLOGICAL SURVEY
R. 9 E. R. 10 E.

RECEIVED
STATE OF OHIO

1982 SEP 10 P 12: 06

HAZARDOUS WASTE FACILITY
APPROVAL BOARD



Printing Ink Division, Borden Chemical
Division of Borden, Incorporated
6725 Gilead Street
Whitehouse, Ohio 43571
Latitude: 41° 31' 05"
Longitude: 83° 48' 03"
Map 1 of 1

(COLTON)
4266 14 NW

Mapped, edited, and published by the Geological Survey
Control by USGS and USC&GS
Topography by plane-table surveys 1925. Revised 1964
Polyconic projection. 1927 North American datum
10,000-foot grid based on Ohio coordinate system, north zone
1000-meter Universal Transverse Mercator grid ticks,
zone 17, shown in blue
Land lines south of Fulton Line based on the First Principal Meridian
Land lines north of Fulton Line based on the Michigan Meridian
Fine red dashed lines indicate selected fence and field lines where
generally visible on aerial photographs. This information is unchecked

DAD CLASSIFICATION

- Light-duty
- Unimproved dirt
- U.S. Route
- State Route

WHITEHOUSE, OHIO

SE/4 SWANTON 15' QUADRANGLE
N4130-W8345/7.5

1964

AMS 4267 III SE--SERIES V652

RECEIVED
OHIO EPA

SEP 14 1982

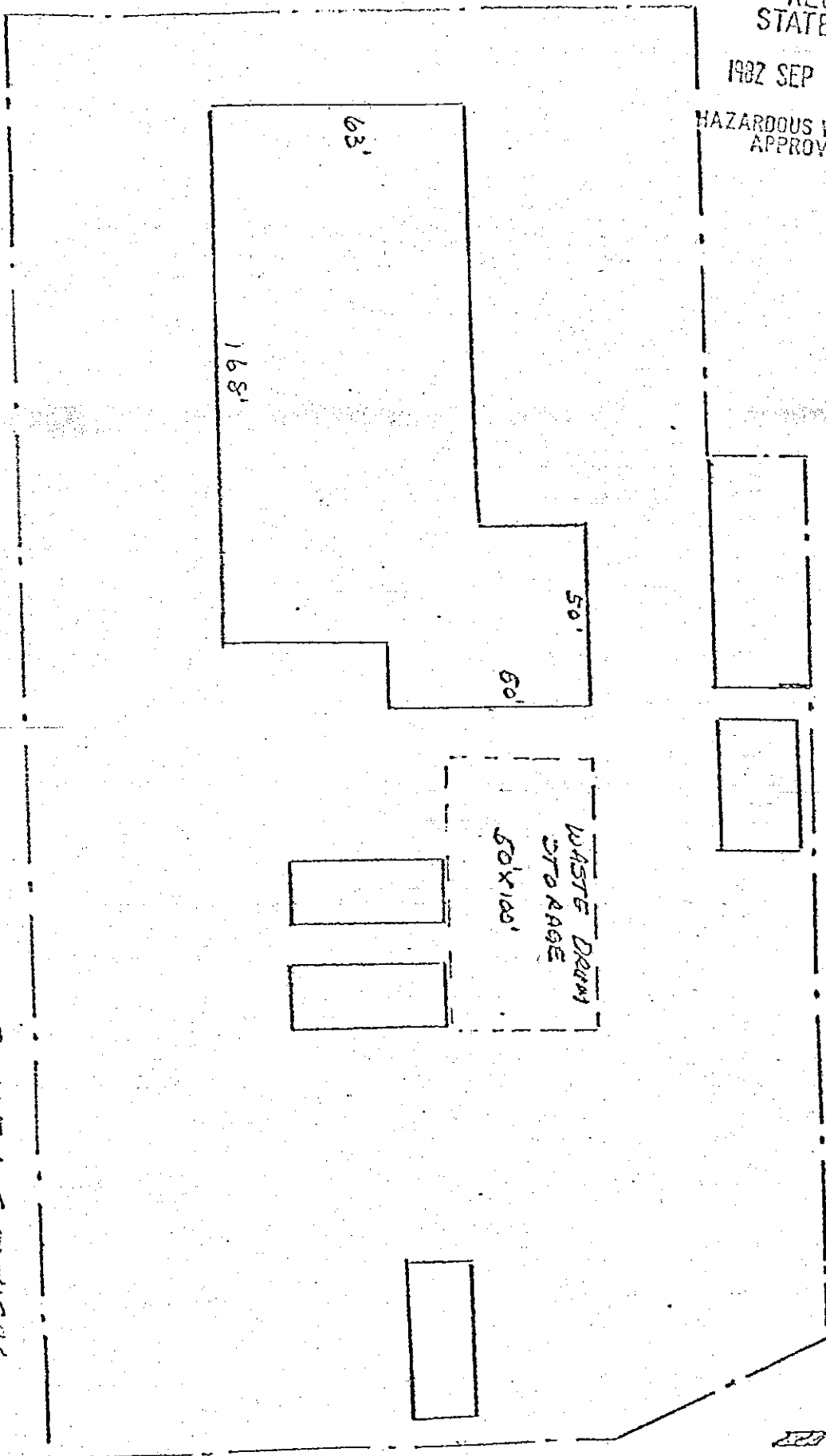
DIV. HAZARDOUS
MATERIALS MANAGEMENT

(BOWLING GREEN)
4266 1 NW
NORTH

RECEIVED
STATE OF OHIO

1982 SEP 10 P 12:00

HAZARDOUS WASTE FACILITY
APPROVAL BOARD



BORDEN CHEMICAL
PAINTING INC DIV.
WHITEHOUSE, OHIO

RECEIVED
OHIO EPA

SEP 14 1982

DIV. HAZARDOUS
MATERIALS M...

V. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

RECEIVED
STATE OF OHIO

1982 SEP 10 P 12:06

HAZARDOUS WASTE FACILITY
APPROVAL BOARDRECEIVED
OHIO EPA

SEP 14 1982

DIV. HAZARDOUS
MATERIALS MANAGEMENT

EPA I.D. NO. (enter from page 1)

F O H D O O 5 0 4 3 7 4 0 1 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

4 1 3 1 0 5 0

LONGITUDE (degrees, minutes, & seconds)

0 8 3 4 8 0 3 0

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code)

Borden Inc

614-225-41

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

F 180 E Broad St.

G Columbus

OH

43215

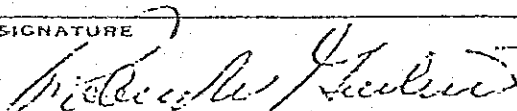
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

Robert W. Gulheit, President
Borden Chemical

11/17/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

FOR OFFICIAL USE ONLY

	DUP	FAC	VODP
S	T	P	L

1987 DISPROCESSES

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if code is not entered in D, enter description)			
	23	24	25	26			27	28	29	30	31	32	33	34
1	K	0	8	6	54,000	P	S	0	1	S	0	2		
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1987 SEP 10 15:12:06

HAZARDOUS WASTE FACILITY

APPROVAL BOARD

RECEIVED

OHIO EPA

SEP 14 1987

DIV. HAZARDOUS MATERIALS MANAGEMENT

CONTINUE ON

RECEIVED
STATE OF OHIO

1982 SEP 10 P 12: 06

HAZARDOUS WASTE FACILITY
APPROVAL BOARD

V. DESCRIPTION OF HAZARDOUS WASTES

1. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

2. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

3. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS.....	P	KILOGRAMS.....	K
TONS.....	T	METRIC TONS.....	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

VI. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item I to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

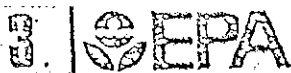
1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES			
				1. PROCESS CODES (enter)		2. PROCESS DESCRIPTION (if code is not entered in D(1))	
X-1	K054	900	P	T03	D80	RECEIVED OHIO EPA SEP 14 1982 DIV. HAZARDOUS MATERIALS MANAGEMENT included with above	
X-2	002	400	P	T03	D80		
X-3	D001	100	P	T03	D80		
X-4	D002						



HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

FOI 0005043740

FOR OFFICIAL USE ONLY

APPLICATION APPROVED DATE RECEIVED (yr., mo., & day)

COMMENTS

STATE OF OHIO

1982 SEP 10 P 12:06

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)☐ 2. NEW FACILITY (Complete item below)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITY PROVIDE THE DATE (yr., mo., & day) CONSTRUCTION BEGAN OR EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete Item I above)

☐ 1. FACILITY HAS INTERIM STATUS☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR OR GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	H
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	C
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	E
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons a other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

5	C										DUP										1																								
1	X-1										X-2										1										2														
A. PROCESS CODE (from list above)		B. PROCESS DESIGN CAPACITY																		FOR OFFICIAL USE ONLY		A. PROCESS CODE (from list above)		B. PROCESS DESIGN CAPACITY																		OF			
1. AMOUNT (specify)		2. UNIT OF MEASURE (enter code)																				1. AMOUNT		2. UNIT OF MEASURE (enter code)																					
15 - 18		27																		29		15 - 18		27																		29			
X-1 S 0 2		600																		G		5		20																		E		6	
X-2 T 0 3		100																		U		7		100																		U		8	
1 S 0 1																						9																						10	
2 S 0 2																																													
3																																													
4																																													
15 - 18		27																		29		15 - 18		27																		29			

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DIV. HAZARDOUS
MATERIALS MANAGEMENT

I. SIC CODES (4-digit, in order of priority)		A. FIRST		B. SECOND	
2	8	9	3	(specify) Printing Ink	
C. THIRD		D. FOURTH		RECEIVED STATE OF OHIO	
(specify)		(specify)		SEP 10 P 12: 05	

III. OPERATOR INFORMATION		A. NAME		B. PHONE (area code & no.)	
Borden Inc		P (specify)		5 1 4 2 2 5 4 0 0	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)		D. PHONE (area code & no.)		Is the name list Item V(II)-A all owner?	
F = FEDERAL S = STATE P = PRIVATE		M = PUBLIC (other than federal or state) O = OTHER (specify)		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
E. STREET OR P.O. BOX		F. CITY OR TOWN		G. STATE	
80 E. Broad Street		Columbus		OH	
H. ZIP CODE		I. INDIAN LAND		Is the facility located on Indian lands?	
4 3 2 1 5		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			

C. EXISTING ENVIRONMENTAL PERMITS		D. PSD (Air Emissions from Proposed Sources)		E. OTHER (specify)	
A. NPDES (Discharges to Surface Water)		B. UIC (Underground Injection of Fluids)		Misc. State Permits	
N		9 P			
C. RCRA (Hazardous Wastes)		E. OTHER (specify)		(specify)	
R		9			

XI. MAP
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)
The mixing, blending and dispersing of colorants into printing inks and servicing of the printing industry.


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XIII. CERTIFICATION (see instructions)		
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in this application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.		
A. OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Art W. Gatheil, President Borden Chemical	<i>Art W. Gatheil</i>	11/17/80
COMMENTS FOR OFFICIAL USE ONLY		
C		

fill-in areas are spaced for elite type, i.e., 12 characters/inch.

FORM 1

GENERAL



U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

HAZARDOUS WASTE

I. EPA I.D. NUMBER

RECEIVED 05043760

DATE OF DEED

GENERAL INSTRUCTIONS

If a preprinted label has been provided, fill in the designated space. Review the information carefully; if any of it is incorrect, through it and enter the correct information in the appropriate fill-in area below. If the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in proper fill-in areas below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B) must be completed regardless. Complete items if no label has been provided. Refer to the instructions for detailed item definitions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X"			SPECIFIC QUESTIONS	MARK		
	YES	NO	FORM ATTACHED		YES	NO	AT
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP Borden Chemical Printing Ink

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)

2 Shadle, TW Lab Production Mgr.

B. PHONE (area code & no.)

419 877 5392

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

36725 Gilead Street

B. CITY OR TOWN

4 Whitehouse

C. STATE

OH

D. ZIP CODE

43571

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 Same

B. COUNTY NAME

LUCAS

C. CITY OR TOWN

D. STATE

E. ZIP CODE

F. COUNTY CODE (if known)

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DIV. HAZARDOUS MATERIALS MANAGEMENT

RCRA INTERIM STATUS INSPECTION FORM

PART 1. GENERAL INFORMATION

U.S. EPA I.D. NO. 0HD 005043740

Facility: Borden Chem / Print Ink Address: 6725 Gilead St. City: White house

State: OH Zip Code: 43571 County: Lucas Telephone: (419) 877-5392

Facility Operator: Same as above Title: _____ Telephone: _____

Facility Owner: Borden Inc. Address: 180 E. Broad St.

City: Columbus State: OH Zip Code: 43215 Telephone: (614) 225-4000

Type of Ownership: ☒ Private _____ Government _____ State HMFAB No. 03-48-146

Date of Inspection: 6-28-82 Time of Inspection: (Start) _____ (Finish) _____

Advance Notification? ☐ No ☒ Yes: _____

Weather Conditions: _____

INSPECTION PARTICIPANT(S)

	(Name)	(Title)	(Telephone)
1.	<u>Thomas W. Shadle</u>	<u>Plant Manager</u>	<u>419-877-5392</u>
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

RCRA INTERIM STATUS INSPECTION FORM

INSPECTOR(S)

(Name)

(Title)

(Telephone)

1. Dave Ferguson

Environmental Scientist

(419) 352-8461

2. _____

3. _____

4. _____

1. Type(s) of hazardous waste site activity: A. _____ Generation B. ☒ Storage C. _____ Treatment

D. _____ Transportation E. _____ Disposal

2. Specific hazardous wastes handled at this facility (EPA HW#):

a) Listed Wastes: H086

b) Non-listed Wastes:

D001 I

D002 C

D003 R

D000 T

3. Has this facility submitted a Part A Permit Application? ☒ Yes ☐ No

4. Does this facility store, treat or dispose of any hazardous waste from any off-site domestic sources?

☐ Yes, See Remark # ☒ No

RCRA INTERIM STATUS INSPECTION FORM

5. Does this facility store, treat or dispose of any hazardous waste from any foreign sources?
____ Yes, See Remark # ____ ☒ No
6. Does this facility transport hazardous waste materials off-site for itself or other generators?
____ Yes, Complete Part 3 (Transp.) ☒ No
- a) Applicable U.S. EPA I.D. Number _____
- b) Ohio P.U.C.O. GR TRSF Number _____
7. A brief description of site activity:

The mixing, blending and dispersing of colorants into printing inks and servicing of the printing industry.

REMARKS, PART 1. (GENERAL INFORMATION)

This facility intends to withdraw their permit.

RCRA INTERIM STATUS INSPECTION FORM

PART 4. GENERAL INTERIM STATUS REQUIREMENTS

SUBPARTS INCLUDED

B: General Facility Standards
C: Preparedness and Prevention
D: Contingency and Emergency

E: Manifest/Records/Reporting
F: Ground Water Monitoring
G: Closure

H: Financial Requirements

Subpart B: General Facility Standards

1. The operator has a detailed chemical and physical analysis of the waste material containing all of the information which must be known to properly treat or store the waste as required by Sections 265.13(a)(1) and 3745-55-13-A-2.
2. The operator has a written waste analysis plan which describes analytical parameters, test methods, sampling methods, testing frequency and responses to any process changes that may affect the character of the waste (Sections 265.13(b) and 3745-55-13-B).
3. If required due to the actual hazards associated with the waste material, the operator has prevented unauthorized access to the active portions of the facility and has provided the following features and equipment (Sections 265.14 and 3745-55-14).
 - a) 24 hour surveillance system.
 - b) Artificial or natural barrier completely surrounding the active portion of the facility.
 - c) Controlled entry (gates, monitors) to the active portion of the facility at all times (265.14(2)(ii) and 3745-55-14-B-2-b).
 - d) "Danger-Unauthorized Personnel Keep Out" signs at each entrance to the active portion of the facility (265.14(c) and 3745-55-14-C).

Yes No N/A Remark #

✓	—	—	—	
✓	—	—	—	
✓	—	—	—	
✓	—	—	—	
✓	—	—	—	
✓	—	—	—	
✓	—	—	—	

ADG Alarm

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
4. The operator must develop and follow a comprehensive, written inspection plan and must document the inspections, malfunctions and any remedial actions taken in an operating record log which is kept for at least three years. The plan includes the following elements: (Sections 265.15 and 3745-55-15)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Inspect emergency equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Inspect monitoring equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Inspect security, alarm and communications devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Inspect process equipment (pipes, pumps, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Inspect containment structures (dikes, curbs, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Inspect facility for structural malfunctions (roof, floor, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Inspect hazardous waste handling/loading areas each day used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Record of any malfunctions due to equipment or operator errors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Record of any hazardous waste discharges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The facility has provided a Personnel Training Program in compliance with Sections 265.16(a)(b)(c) and 3745-55-16-A-B-C including instruction in safe equipment operation and emergency response procedures, training new employees within 6 months and providing an annual training program refresher course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The facility keeps all records required by Sections 265.16(d)(e) and 3745-55-16-D-E including written job titles, job descriptions and documented employee training records.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If required due to the actual hazards associated with Ignitable, Reactive or incompatible waste materials, the facility meets the following requirements (Sections 265.17 and 3745-55-17).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

- a) Protection from sources of ignition.
- b) Physical separation of incompatible waste materials.
- c) "No Smoking" or "No Open Flames" signs near areas where Ignitable or Reactive wastes are handled.
- d) Any co-mingling of waste materials is done in a controlled, safe manner as prescribed by Sections 265.17(b) and 3745-55-17-B.

Subpart C: Preparedness and Prevention

1. Has there been a fire, explosion or non-planned release of hazardous waste at this facility? (265.31 and 3745-55-31).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. If required due to actual hazards associated with the waste material, the facility has the following equipment: (265.32 and 3745-55-32).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Internal alarm system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Access to telephone, radio or other device for summoning emergency assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Portable fire control equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Water at adequate volume and pressure via hoses sprinklers, foamers or sprayers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. All required safety, fire and communications equipment is tested and maintained as necessary; testing and maintenance are documented. (265.33 and 3745-55-33).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. If required due to the actual hazards associated with the waste material, personnel have immediate access to an emergency communication device during times when hazardous waste is being physically handled (Sections 265.34 and 3745-55-34).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

	Yes	No	N/A	Remark #
5. If required due to the actual hazards associated with the waste material, adequate aisle space to allow unobstructed movement or emergency or spill control equipment is maintained (265.35 and 3745-55-35).	✓	—	—	—
6. If required due to the actual hazards associated with the waste material, the facility has attempted to make appropriate arrangements with local emergency service authorities to familiarize them with the possible hazards and the facility layout (265.37(a) and 3745-55-37-A).	✓	—	—	—
7. Where state or local emergency service authorities have declined to enter into any proposed special arrangements or agreements the refusal has been documented (265.37(b) and 3745-55-37-B).	—	—	✓	—
Subpart D: Contingency and Emergency				
1. The facility has a written Contingency Plan designed to minimize hazards from fires, explosions or unplanned releases of hazardous wastes (265.51 and 3745-55-51) and contains the following components:	✓	—	—	—
a) Actions to be taken by personnel in the event of an emergency incident.	✓	—	—	—
b) Arrangements or agreements with local or state emergency authorities.	✓	—	—	—
c) Names, addresses and telephone numbers of all persons qualified to act as emergency coordinator.	✓	—	—	—
d) A list of all emergency equipment including location, physical description and outline of capabilities.	✓	—	—	—
e) If required due to the actual hazards associated with the waste(s) handled, an evacuation plan for facility personnel (Sections 265.51(f) and 3745-55-51-F).	✓	—	—	—
2. A copy of the Contingency Plan and any plan revisions is maintained on-site and has been submitted to all Local and State emergency service authorities that might be required to participate in the execution of the plan. (Sections 265.53 and 3745-55-53).	✓	—	—	—

RCRA INTERIM STATUS INSPECTION FORM

3. The plan is revised in response to facility, equipment and personnel changes or failure of the plan (265.54 and 3745-55-54).
4. An emergency coordinator is designated at all times (on-site or on-call) is familiar with all aspects of site operation and emergency procedures and has the authority to implement all aspects of the Contingency Plan (Sections 265.55 and 3745-55-55).
5. If an emergency situation has occurred, the emergency coordinator has implemented all or part of the Contingency Plan and has taken all of the actions and made all of the notifications deemed necessary under Sections 265.56 and 3745-55-56.

Subpart E: Manifests/Records/Reporting

NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO BOTH ON-SITE AND OFF-SITE TREATMENT, STORAGE AND DISPOSAL FACILITIES.

1. The operator maintains a written operating record at his facility as required by Sections 265.73 and 3745-55-73 which contains the following information:
 - a) Description and quantity of each hazardous waste treated, stored or disposed of within the facility and the date(s) and method(s) pertinent to such treatment storage or disposal (262.73(b)(1) and 3745-55-73-B-1).
 - b) Common name, EPA Hazardous Waste Identification Number and physical state (liquid, solid, gas) of the waste(s).
 - c) The estimated (or actual) weight, volume or density of the waste material(s).
 - d) A description of the method(s) used to treat, store or dispose of the waste(s) using the EPA Handling Codes listed in 45 FR 33252 (May 19, 1980).

<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RCRA INTERIM STATUS INSPECTION FORM

	Yes	No	N/A	Remark #
e) The present physical location of each hazardous waste within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f) <u>FOR DISPOSAL FACILITIES</u> , the location and quantity of each hazardous waste recorded on a map of the facility and cross-references to any pertinent manifest document number(s) (265.73(b)(2) and 3745-55-73-B-2).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
g) Records of any waste analyses and trial tests required to be performed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h) Records of the inspections required under Sections 265.15 and 3745-55-15 (General Inspection Requirements - Subpart B).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
i) Records of any monitoring, testing or analytical data required under other Subparts as referenced by Sections 265.73(b)(6) and 3745-55-73-B-6.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
j) Records of Closure cost estimates and Post-Closure (DISPOSAL ONLY) cost estimates required under Subpart H and Section 3745-56-30, 32 and 34.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The operator has submitted an annual Treatment-Storage-Disposal Operating Report (by March 1) containing all of the operating information required under Sections 265.75 and 3745-55-75.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NOTE: THIS REPORT IS NOT THE SAME AS THE REPORT REQUIRED TO BE FILED BY GENERATORS UNDER SECTIONS 262.41 AND 3745-52-41.

3. When applicable; the operator has submitted reports on releases of hazardous wastes, fires, explosions, groundwater contamination data and facility closure (265.77 and 3745-55-77).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO ONLY OFF-SITE TREATMENT, STORAGE AND DISPOSAL FACILITIES.

4. Manifests received by the facility are signed and dated; one copy is given to the transporter, one copy is sent to the generator within 30 days and one copy is kept for at least 3 years (Sections 265.71 and 3745-55-71).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
a) If shipping papers are used in lieu of manifests (bulk shipments, etc.) the same requirements are met (265.71(b) and 3745-55-71-B).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b) Any significant discrepancies in the manifest, as defined in Sections 265.72(a) and 3745-55-72-A, are noted in writing on the manifest document (Sections 265.71(a)(2) and 3745-55-71-A-2).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Any manifest discrepancies have been reconciled within 15 days as required by Sections 265.72(b) and 3745-55-72-B or the operator has submitted the required information to the Regional Administrator/Director.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. If the facility has accepted any unmanifested hazardous wastes from off-site sources (except from small quantity generators) for treatment, storage or disposal an unmanifested waste report containing all the information required by Sections 265.76 and 3745-55-76 has been submitted to the Regional Administrator/Director within 15 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Subpart F: Groundwater Monitoring

NOTE: THESE REQUIREMENTS ARE APPLICABLE TO SURFACE IMPOUNDMENTS, LANDFILLS AND LAND TREATMENT FACILITIES ON AND AFTER NOVEMBER 19, 1981.

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
1. The facility has implemented one or more of the following alternatives with respect to the Groundwater Monitoring requirements in Sections 265.90(a) and 3745-55-90-A:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a) A Groundwater Monitoring System meeting the minimum requirements of Sections 265.91 and 3745-55-91 has been installed which is sampled, tested and operated in accordance with the requirements of Sections 265.92, 265.93, 265.94, 3745-55-92, -93 and -94.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

RCRA INTERIM STATUS INSPECTION FORM

<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b) A waiver of all or part of the Groundwater Monitoring requirements has been obtained by demonstrating a low potential for the migration of hazardous wastes and constituents in accordance with the requirements of Sections 265.90(c) and 3745-55-91-C.

c) An alternate Groundwater Monitoring System Plan that was first submitted to the Regional Administrator/Director was implemented and is operated and maintained in accordance with Sections 265.90(d) and 3745-55-90-D.

Subpart G: Closure and Post-Closure

NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO BOTH DISPOSAL AND NON-DISPOSAL FACILITIES:

<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. A written Closure Plan is on file at the facility and contains the following elements: (Sections 265.112 and 3745-56-03)

a) A description of how and when the facility will be closed (265.112(a)(1) and 3745-56-03-A-1).

b) A description of how any of the applicable closure requirements in other Subparts of Sections 265 and 3745-55,-56,-57,-58 (Tanks, Surface Impoundments, Landfills, etc.) will be carried out.

c) An estimate of the maximum amount of hazardous wastes being treated or in storage at the facility.

d) A description of steps taken to decontaminate facility equipment.

e) The year closure is expected to begin and a list of dates over which the various phases of closure are expected to be completed.

2. The Closure Plan has been amended within 60 days in response to any changes in facility design, processes or closure dates.

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
3. The Closure Plan has been submitted to the Regional Administrator/Director 180 days prior to beginning the Closure process.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4. If Closure has been completed, the facility was closed in a manner which minimizes any future problems in compliance with the Closure performance standard in Sections 265.111 and 3745-56-02.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
a) The facility has been closed within the time limits specified in Sections 265.113 and 3745-56-04.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b) Upon completion of Closure all facility equipment and structures were decontaminated and any hazardous residues were properly disposed of (265.114 and 3745-56-05).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c) Completion of Closure has been certified to the Regional Administrator by the Owner/Operator and an independent Professional Engineer (265.115 and 3745-56-06).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
NOTE: THE FOLLOWING REQUIREMENTS ARE APPLICABLE TO <u>ONLY DISPOSAL FACILITIES</u> .				
5. A written Post-Closure Plan is on file at the facility which describes all Post-Closure activities and addresses all of the plan elements required by Sections 265.118(a) and 3745-56-08-A.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The Post-Closure Plan has been amended within 60 days in response to any changes in facility design or operation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The Post-Closure Plan has been submitted to the Regional Administrator/Director 180 days prior to beginning Closure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The Owner/Operator has submitted all of the information on prior use of the property required in Sections 265.119 and 3745-56-10 to the Local Land Authority within 90 days after Closure is completed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

RCRA INTERIM STATUS INSPECTION FORM

Yes	No	N/A	Remark #
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9. The property owner has attached a notation to the property deed or other instrument which will notify any potential purchaser that the property has been used to manage hazardous waste and future use of the property is restricted under Sections 265.117(c) and 3745-56-08-C as required in Sections 265.120 and 3745-56-10.

Subpart H: Financial Requirements

1. A written cost estimate for Closure of the facility (by the methods and procedures specified in the facility Closure Plan) is available for review on and after May 19, 1981 (Sections 265.142 and 3745-56-32).

NOTE: REGULATIONS PROMULGATED IN 46 FR 2877-2892 IN REGARD TO FINANCIAL REQUIREMENTS HAVE BEEN STAYED UNTIL OCTOBER 13, 1981 AND MAY BE AMENDED OR REPROPOSED AT THAT TIME.

REMARKS, PART 4. GENERAL INTERIM STATUS REQUIREMENTS

RCRA INTERIM STATUS INSPECTION FORM

PART 5. TREATMENT/STORAGE/DISPOSAL

SUBPARTS INCLUDED

I: Management of Containers	L: Waste Piles	O: Incinerators
J: Management of Tanks	M: Land Treatment	P: Thermal Treatment
K: Surface Impoundments	N: Landfills	Q: Chemical/Physical/Biological Treatment

Subpart I: Management of Containers

- | | <u>Yes</u> | <u>No</u> | <u>N/A</u> | <u>Remark #</u> |
|---|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 1. Hazardous wastes are stored in closed containers which are in good physical condition and are compatible with the wastes stored in them (Sections 265.171, .172, .173 and 3745-56-51, -52-53). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The area where containers are stored is inspected for evidence of leaks or corrosion at least weekly and such inspections are documented (265.174 and 3745-56-54). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

NOTE: FACILITIES OPTING FOR LONG TERM STORAGE ARE NOT REQUIRED TO MEET PRE-TRANSPORT LABELING REQUIREMENTS UNTIL THE CONTAINERS ARE ACTUALLY OFFERED FOR TRANSPORT AND ARE NOT REQUIRED TO AFFIX AN ACCUMULATION DATE. (SECTIONS 262 AND 3745-52)

- | | <u>Yes</u> | <u>No</u> | <u>N/A</u> | <u>Remark #</u> |
|---|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 3. Containers holding Ignitable or Reactive waste(s) are located at least 50 feet (15 Meters) from the property line and the general requirements for handling such wastes in Sections 265.17 and 3745-55-17-B (physical separation, signs and safety) are met (265.176 and 3745-56). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Incompatible waste materials are not placed in the same containers or put in contaminated containers unless it is done under completely controlled and safe conditions as specified in Sections 265.17(b) and 3745-55-17-B (Sections 265.177(a), (b) and 3745-56-57-A-B). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

RCRA INTERIM STATUS INSPECTION FORM

Yes	No	N/A	Remark #
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5. Containers holding hazardous wastes are never stored near other materials which may interact with the waste in a hazardous manner (Sections 265.177 (C) and 3745-56-57-C).

Subpart J: Storage in Tanks

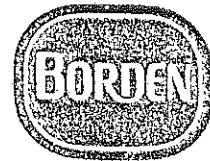
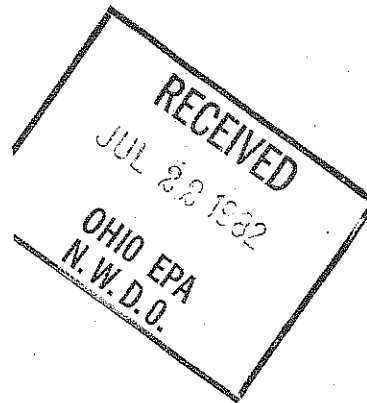
1. The tank(s) are operated in compliance with the safety requirements of Sections 265.17, 265.192(b), 3745-55-17 and 3745-56-72-B and are equipped with a waste-foot cutoff or bypass system as required in Sections 265.192(d) and 3745-56-72-D.
2. Uncovered tanks have at least 2 feet (60 cm.) of freeboard unless they are equipped with a spill containment system with a capacity that equals or exceeds the volume that 2 feet of freeboard would otherwise provide (265.192(c) and 3745-56-72-C).
3. Daily inspections are made of all systems pertinent to the proper operation of the tank: discharge and cutoff, monitoring equipment, tank level and freeboard (265.194 and 3745-56-74).
4. Weekly inspections are made of all tank construction materials and containment structures (265.194 and 3745-56-74).
5. Whenever tanks are used to treat or store wastes substantially different from previous wastes or when substantially different treatment processes are used in the tank, the facility has insured the safety of such changes by one or both of the following methods: (Sections 265.193(a) and 3745-56-73-A).
 - a) A complete waste analysis plus bench scale tests or pilot tests were conducted prior to implementing the proposed changes and all data is on file in the facility operating record.
 - b) Written, documented information on similar storage or treatment process changes was obtained prior to implementing the proposed changes and all documentation is on file in the facility operating record.

RCRA INTERIM STATUS INSPECTION FORM

	<u>Yes</u>	<u>No</u>	<u>N/A</u>	<u>Remark #</u>
6. With the exception of emergency situations, whenever Ignitable or Reactive wastes are placed in tanks the facility has insured the safety of the operation by one or both of the following methods, (Sections 265.198(a) and 3745-56-78).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a) The waste is treated immediately before or after being placed in the tank so that it is no longer Ignitable or Reactive and such treatment is done in compliance with the safety requirements of Sections 265.17(b) and 3745-55-17-B.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b) The waste is stored or treated under protected conditions eliminating the possibility of ignition or reaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Covered tanks used to treat or store Ignitable or Reactive wastes are in compliance with NFPA buffer zone requirements (Flammable and Combustible Code-1977) (Sections 265.198(b) and 3745-56-78-B).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Incompatible waste materials are not placed in the same tanks or put in contaminated tanks unless it is done under completely controlled and safe conditions as specified in Section 265.17(b) (Sections 265.199 and 3745-56-79).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Whenever a tank is permanently taken out of service or upon closure of the facility all hazardous wastes and residues are removed and properly disposed of (Sections 265.197 and 3745-56-77).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

BORDEN INC

180 EAST BROAD STREET, COLUMBUS, OHIO 43215



THOMAS R. HEATON
ENVIRONMENTAL SPECIALIST
ENVIRONMENTAL AFFAIRS

July 15, 1982

USEPA Region V
111 West Jackson Blvd.
Chicago, IL 60604

Attn: 5HW-TVB

Re: Hazardous Waste Sudden Accidental Liability Insurance

Dear Sirs:

Borden Inc. submits certificates of liability insurance
for sudden accidental occurrences for the following facilities:

Borden Chemical, Woodlawn, OH	OHD068932011
Borden Chemical, Whitehouse, OH	OHD005043740
Borden Chemical, Delaware, OH	OHD004297834
Columbus Coated Fabrics, Cols. OH	OHD004294351
Borden Chem., St. Charles, IL	ILD064017940
Borden Chem., Illiopolis, IL	ILD005158548
Borden Chem., Cicero, IL	ILD074367434
Pet-Ag Div., Borden Inc., Hampshire, IL	ILD005468822
Borden Chem., Portage, MI	MID092950195

If you have any questions, please call the undersigned
at (614) 225-4860.

Sincerely,

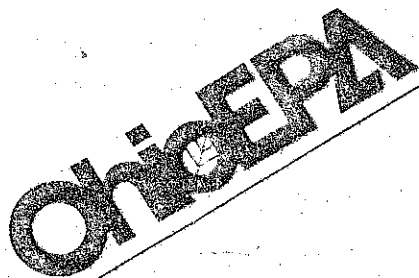
Thomas R Heaton

Thomas R. Heaton

TRH/slw

Encl.

CERTIFIED MAIL
RETURN RECEIPT REQUESTED



Re: Application Number 81-HW-0146
Lucas County

September 3, 1981

Thomas W. Shadle
Lab Production Manager
Borden Chemical
6725 Gilead Street
Whitehouse, Ohio 43591

Dear Mr. Shadle:

On August 26, 1981, Dave Ferguson of the Ohio EPA conducted an inspection of your facility, as part of the Hazardous Waste facility permit review process. Your facility was represented by yourself.

Enclosed are two forms. The one titled "TREATMENT, STORAGE AND DISPOSAL FACILITY" is a copy of the form used during the inspection to evaluate your facility.

The other form, "DEFICIENCY NOTIFICATION TABLE", relates to the "TREATMENT, STORAGE AND DISPOSAL FACILITY" form and specifies what action must be taken where deficiencies were noted. A mark in column four of the "DEFICIENCY NOTIFICATION TABLE" denotes a violation of current regulations or pinpoints areas which will be covered by regulations not yet effective. The capital letter codes in column four are explained on the last page of the "DEFICIENCY NOTIFICATION TABLE".

You are hereby advised that total compliance with the regulations contained in 40 CFR 265 is required as a condition of continuing interim status with the U.S. EPA. Failure to list specific deficiencies in this communication does not relieve you from the responsibility of complying with all applicable regulations.

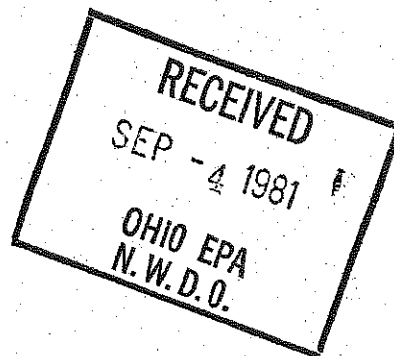
Very truly yours,

Paul Flanigan, P.E.
Hazardous Waste Materials Management

PF/bsr

cc: Kathleen Homer, U.S. EPA, Region V
Dave Ferguson, NWDO

CERTIFIED MAIL



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DEFICIENCY NOTIFICATION TABLE ISS INSPECTION

FACILITY NO. - 81-HW-0146
 OWNER - *Borden Incorporated*
 FACILITY NAME - *Borden Chemical Planting Ink*
 FACILITY LOCATION - *6725 Gilead Street Whitehouse, Ohio 43571*
 FACILITY CONTACT - *T.W. Shadle Lab Production Mgr* PHONE NO. - *419/877-5392*
 ISS INSPECTION DATE - *Aug 26, 1981*

Page	COLUMN I Item No.	COLUMN II OAC Reference	COLUMN III USEPA Reference	COLUMN IV See Code Following	COLUMN V Refer To ISS Remark	COLUMN VI OEPA Use
3	III A 1	3745-55-12(A)	265.12 (A)			
	2					
	B 1	3745-55-13	265.13			
	2	3745-55-13	265.13			
	3	"	"			
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	3	"	"			
	4	"	"	<i>B</i>	<i>✓</i>	
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	5	"	"			
	6	"	"			
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	3	"	"			
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	B 1	3745-55-32	265.32			
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	3	"	"			
	C 1	3745-55-33	265.33			
	2	"	"			
	D 1	3745-55-34	265.34			
	E	3795-55-35	265.35			
	V A 1	3745-55-52	265.52			

Page	Item No.	UAC Reference	USEPA Reference	See Code Following	Refer To ISS Remark	OEPA Use
	A 2	3745-55-52	265.52			
	3	"	"			
	4	"	"			
	5	"	"			
7	B 1	3745-55-53	265.53			
	C 1	3745-55-55	265.55			
	2	"	"			
	3	"	"			
	D 1	3745-55-56	265.56			
	VI A 1	3745-55-71	265.71			
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	B 1	3745-55-72	265.72			
8	C 1	3745-55-73	265.73			
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	g	"	"			
9	VII A 1	3745-56-03	265.112			
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	4	3745-56-32	265.142			
	B 1	3745-56-09	265.118			
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	3	3745-57-06	265.225			
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	7	3745-57-11	265.230			

Page	Item No.	OAC Reference	USEPA Reference	See Code Following	Refer To ISS Remark	OEPA Use
	L	1	3745-57-31	265.251		
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		7	3745-57-59	265.279		
		8	3745-57-61	265.281		
		9	3745-57-62	265.282		
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			3745-55-17	265.17(b)		
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			3	"	"	
			4	"	"	
			5	"	"	

Page	Item No.	OAC Reference	USEPA Reference	See Code Following	Refer To ISS Remark	OE Us
	III A 1	3745-58-37	265.377			
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	C 1	"	"			
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	E 1	"	"			
	F 1	"	"			
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	(B)	3745-52-33	262.33			
	(C)	3745-52-34	262.34			
21	3 1	3745-56-54	265.174			
	2	"	"			
	3	3745-56-72	265.192			
	4a	"	"			
	b	"	"			
	c	3745-56-74	265.184			
	d	3745-56-78	265.198			
	e	3745-56-79	265.199			
	f	3745-52-40	262.40			
22	VI A	3745-52-41	262.41			
	B	3745-52-50	262.50			
	VII 1a	"	"			
	b	"	"			
	c	"	"			
	2	"	"			
23 X	I	3745-53-22	263.22			
	II A	3745-53-20	263.20			
	B	"	"			
	V A	3745-53-10	263.10			
	B	3745-53-10	"			

KEY TO CODED ITEMS (COLL) IV)

- A. Because the inspection at this facility was conducted prior to May 19, 1981, requirements which became effective on that date were not checked. These requirements are now effective and must be met as a condition of interim status under the federal regulations and as part of the considerations for issuance of an Ohio Hazardous Waste Permit.
- B. or C. The inspection revealed a deficiency in compliance with this item, which must be satisfactorily corrected. A determination of compliance will be made in the future.
- D. The inspection revealed a violation of regulations pertaining to this item. Since the environmental consequences of this violation may be quite serious this problem must be corrected as soon as possible. We will schedule another inspection no sooner than 20 days after the date of this letter to determine if compliance has been achieved. Further steps in the permitting process will be delayed until the re-inspection.
- E. Regulations concerning this item will become effective November 19, 1981. These requirements were not addressed in the inspection, but compliance is required by November 19, in order to meet federal interim status requirements and as a part of the considerations in issuing an Ohio Hazardous Waste Permit.
- F. Inspection revealed non compliance with this item. Compliance with this item is required unless a facility has filed as a storage facility. You should either correct the deficiency listed or file an amended Part A application for a storage facility.
- G. NFPA's code requires that the tanks be located 50 feet from the property line.

STATE IDENTIFICATION NUMBER

8Y-HW- 0146

EPA IDENTIFICATION NUMBER

OH D005043740

TREATMENT, STORAGE, AND DISPOSAL FACILITIES
Form A.- General Facility Standards

I. General Information:

- (A) Facility Name: Borden Chemical Printing Ink
(B) Street: 6725 Gilead St.
(C) City: Whitehouse (D) State: OH (E) Zip Code: 43571
(F) Phone: 419-877-5392 (G) County: LUCAS
(H) Operator: Same as above
(I) Street: _____
(J) City: _____ (K) State: _____ (L) Zip Code: _____
(M) Phone: _____ (N) County: _____
(O) Owner: Borden Inc.
(P) Street: 180 E. Broad St.
(Q) City: Cols (R) State: OH (S) Zip Code: 43215
(T) Phone: 614-225-4000 (U) County: Franklin
(V) Date of Inspection: 8-26-81 (W) Time of Inspection (From) 10:00 (To) 12:00
(X) Weather Conditions: Fair 80°

(Y) Person(s) Interviewed

Thomas W. Shadde

Title

Lab/Production Mgr

Telephone

419 677-4352

(Z) Inspection Participants

Dave Ferguson

Agency/Title

Telephone

(AA) Preparer Information

Name

Dave Ferguson

Agency/Title

CEPA, ES

Telephone

419-352-2461

II. SITE ACTIVITY:

Complete sections I through VII for all treatment, storage, and/or disposal facilities. Complete the forms (in parenthesis) in section VIII corresponding to the site activities identified below:

 A. Storage and/or Treatment

1. Containers (I)

2. Tanks (J)

3. Surface Impoundments (K)

4. Waste Piles (L)

 B. Land Treatment (M)

 C. Landfills (N)

 D. Incineration and/or Thermal Treatment
(O and P)

 E. Chemical, Physical, and Biological
Treatment (Q)

Note: If facility is also a generator or transporter of hazardous waste complete sections IX and X of this form as appropriate.

III. GENERAL FACILITY STANDARDS:
(Part 265 Subpart B)

	Yes	No	NI*	Remark
(A) Has the Regional Administrator been notified regarding:				
1. Receipt of hazardous waste from a foreign source?	<u>N/A</u>	<u>X</u>	—	_____
2. Facility expansion?	<u>N/A</u>	<u>X</u>	—	_____
(B) General Waste Analysis:				
1. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	<u>X</u>	—	—	_____
2. Does the owner or operator have a detailed waste analysis plan on file at the facility?	<u>X</u>	—	—	_____
3. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	<u>X</u>	—	—	_____
(C) Security - Do security measures include: (if applicable)				
1. 24-Hour surveillance?	—	<u>X</u>	—	<u>ADT Alarm</u>
2. Artificial or natural barrier around facility?	<u>X</u>	—	—	_____
3. Controlled entry?	<u>X</u>	—	—	_____
4. Danger sign(s) at entrance?	—	<u>X</u>	—	<u>On Order</u>
D) Do Owner or Operator Inspections Include:				
1. Records of malfunctions?	<u>X</u>	—	—	_____
2. Records of operator error?	<u>X</u>	—	—	_____
3. Records of discharges?	<u>X</u>	—	—	_____

Not Inspected

III. GENERAL FACILITY STANDARDS - Continued

	Yes	No	NI*	Remarks
4. Inspection schedule?	<u>X</u>	---	---	-----
5. Safety, emergency equipment?	<u>X</u>	---	---	-----
6. Security devices?	<u>X</u>	---	---	-----
7. Operating and structural devices?	<u>X</u>	---	---	-----
8. Inspection log?	<u>X</u>	---	---	-----
(E) Do personnel training records include: (Effective 5/19/81)				
1. Job titles?	<u>X</u>	---	---	-----
2. Job descriptions?	<u>X</u>	---	---	-----
3. Description of training?	<u>X</u>	---	---	-----
4. Records of training?	<u>X</u>	---	---	-----
5. Have facility personnel received required training by 5-19-81?	<u>X</u>	---	---	-----
6. Do new personnel receive required training within six months?	<u>X</u>	---	---	-----
(F) If required are the following special requirements for ignitable, reactive, or incompatible wastes addressed?				
1. Special handling?	<u>X</u>	---	---	-----
2. No smoking signs?	<u>X</u>	---	---	-----
3. Separation and protection from ignition sources?	<u>X</u>	---	---	-----

*Not Inspected

IV. PREPAREDNESS AND PREVENTION:
(Part 265 Subpart C)

(A) Maintenance and Operation
of Facility:

Is there any evidence of fire,
explosion, or release of
hazardous waste or hazardous
waste constituent?

Yes No NI* Remarks

— X —

(B) If required, does the facility
have the following equipment:

1. Internal communications or
alarm systems?

X — —

2. Telephone or 2-way radios
at the scene of operations?

X — —

3. Portable fire extinguishers,
fire control, spill control
equipment and decontamination
equipment?

X — —

Indicate the volume of water and/or foam available for fire control:

On City Water

(C) Testing and Maintenance of
Emergency Equipment:

1. Has the owner or operator
established testing and
maintenance procedures
for emergency equipment?

X — —

Exrex, 6mth inspec

2. Is emergency equipment
maintained in operable
conditions?

X — —

(D) Has owner or operator provided
immediate access to internal
alarms? (if needed)

X — —

(E) Is there adequate aisle space for unobstructed movement?

X — — —

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES:
(Part 265 Subpart D)

(A) Does the Contingency Plan contain the following information:

Yes No NI* Remarks

1. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Countermeasures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)
2. Arrangements agreed by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?
3. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?
4. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?
5. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)

X — — —

X — — —

X — — —

X — — —

X — — —

*Not Inspected

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES - Continued

	Yes	No	NI*	Remarks
(B) Are copies of the Contingency Plan available at site and local emergency organizations?	<u>X</u>	—	—	—
(C) Emergency Coordinator				
1. Is the facility Emergency Coordinator identified?	<u>X</u>	—	—	—
2. Is coordinator familiar with all aspects of site operation and emergency procedures?	<u>X</u>	—	—	—
3. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<u>X</u>	—	—	—
(D) Emergency Procedures				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?	—	—	<u>X</u>	—

VI. MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING (Part 265 Subpart E)

	Yes	No	NI*	Remarks
(A) Use of Manifest System				
1. Does the facility follow the procedures listed in §265.71 for processing each manifest?	<u>X</u>	—	—	<u>Chem H&T, Wyandot,</u>
2. Are records of past shipments retained for 3 years?	—	—	—	<u>(Must be in Suture)</u>
(B) Does the owner or operator meet requirements regarding manifest discrepancies?	<u>X</u>	—	—	—

(C) Operating Record

1. Does the owner or operator maintain an operating record as required in 265.73?

X — — —

2. Does the operating record contain the following information:

**b. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in Appendix I?

X — — —

c. The location and quantity of each hazardous waste within the facility?

X — — —

***d. A map or diagram of each cell or disposal area showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

N/A — — —

e. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

X — — —

f. Reports detailing all incidents that required implementation of the Contingency Plan?

N/A — — —

g. All closure and post closure costs as applicable? (Effective 5-19-81)

X — — —

** See page 33252 of the May 19, 1980, Federal Register.

*** Only applies to disposal facilities

VII. CLOSURE AND POST CLOSURE
(Part 265 Subpart G)

	Yes	No	NI*	Remarks
(A) Closure and Post Closure				
1. Is the facility closure plan available for inspection by May 19, 1981?	<u>X</u>	—	—	_____
2. Has this plan been submitted to the Regional Administrator	—	<u>X</u>	—	_____
3. Has closure begun?	—	<u>X</u>	—	_____
4. Is closure estimate available by May 19, 1981?	<u>X</u>	—	—	_____
(B) Post closure care and use of property				
Has the owner or operator supplied a post closure monitoring plan? (effective by May 19, 1981)				
	—	—	<u>N/A</u>	_____

VIII. FACILITY STANDARDS
(Part 265, Subparts I thru R)

I
USE AND MANAGEMENT OF CONTAINERS

Facility Name: Borden Date of Inspection: 8-26-81

	Yes	No	NI*	Remarks
1. Are containers in good condition?	<u>X</u>	—	—	_____
2. Are containers compatible with waste in them?	<u>X</u>	—	—	_____
3. Are containers stored closed?	<u>X</u>	—	—	_____
4. Are containers managed to prevent leaks?	<u>X</u>	—	—	_____
5. Are containers inspected weekly for leaks and defects?	<u>X</u>	—	—	_____
6. Are ignitable & reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive.)	<u>X</u>	—	—	_____

7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply.)

Yes No N^o Remarks

8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?

J
TANKS

Facility Name: _____

Date of Inspection: _____

1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank?

2. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, or dikes or other containment structures?

3. Do continuous feed systems have a waste-feed cutoff?

4. Are waste analyses done before the tanks are used to store a substantially different waste than before?

5. Are required daily and weekly inspections done?

6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)

7. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR 265.17(b) apply.)

*Not Inspected

	Yes	No	NI*	Remarks
Has the owner or operator addressed the waste analysis requirements of 265.402?	—	—	—	—
4. Are inspection procedures followed according to 265.403?	—	—	—	—
5. Are the special requirements fulfilled for ignitable or reactive wastes?	—	—	—	—
6. Are incompatible wastes treated? (If yes, 265.17(b) applies.)	—	—	—	—

Note: EPA has temporarily suspended the applicability of the requirements of the hazardous waste regulations in 40 CFR Parts 122, 264 and 265 to owners and operators of (1) wastewater treatment tanks that receive, store, and treat wastewaters that are hazardous waste or that generate, store or treat a wastewater treatment sludge which is a hazardous waste where such wastewaters are subject to regulation under Sections 402 or 307(b) of the Clean Water Act (33 U.S.C. 1251 et seq.) and (2) neutralization tanks, transport vehicles, vessels, or containers which neutralize wastes which are hazardous only because they exhibit the corrosivity characteristic under 40 CFR §261.22 or are listed as hazardous wastes in Subpart D of 40 CFR Part 261 only for this reason.

IX

Complete this section if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

1. MANIFEST REQUIREMENTS

	Yes	No	NI*	Remarks
(A) Does the operator have copies of the manifest available for review?	<input checked="" type="checkbox"/>	—	—	—
(B) Do the manifest forms reviewed contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements)				
1. Manifest document number?	<input checked="" type="checkbox"/>	—	—	—
2. Name, mailing address, telephone number, and EPA ID Number of Generator	<input checked="" type="checkbox"/>	—	—	—

	Yes	No	NI*	Remarks
3. Name and EPA ID Number of Transporter(s)?	<u>X</u>	—	—	_____
4. Name, address, and EPA ID Number of Designated permitted facility and alternate facility?	<u>X</u>	—	—	_____
5. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<u>X</u>	—	—	_____
6. The total quantity of waste(s) and the type and number of containers loaded?	<u>X</u>	—	—	_____
7. Required certification?	<u>X</u>	—	—	_____
8. Required signatures?	<u>X</u>	—	—	_____
(C) Does the owner or operator submit exception reports when needed?	<u>X</u>	—	—	_____

2. PRE-TRANSPORT REQUIREMENTS

(A) Is waste packaged in accordance with DOT Regulations? (Required prior to movement of hazardous waste off-site)	<u>X</u>	—	—	_____
(B) Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required to movement of hazardous waste off-site)	<u>X</u>	—	—	_____
(C) If required, are placards available to transporters of hazardous waste?	<u>X</u>	—	—	_____

VI. RECORDKEEPING and REPORTING
(Part 262, Subpart D)

	Yes	No	NI*	Remarks
(A) Are Manifests, Annual Reports, Exception Reports, and all test results and analyses retained for at least three years?	<u>X</u>	___	___	_____
(B) Has the generator submitted Annual Reports and Exception Reports as required?	<u>X</u>	___	___	_____

VII. INTERNATIONAL SHIPMENTS
(Part 262, Subpart E)

Has the installation imported or exported Hazardous Waste?	___	___	___	_____
--	-----	-----	-----	-------

(If answered Yes, complete the following as applicable.)

1. Exporting Hazardous waste, has a generator:				
a. Notified the Administrator in writing?	___	___	___	_____
b. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country?	___	___	___	_____
c. Met the Manifest requirements?	___	___	___	_____
2. Importing Hazardous Waste, has the generator:				
Met the manifest requirements?	___	___	___	_____

*Not Inspected

hazardous • waste • facility • approval • board

James A. Rhodes, Governor
Wayne S. Nichols, Chairman

hwfab

P.O. Box 1049
361 E. Broad St.
Columbus, Ohio 43216
(614) 462-6981

Borden Chemical Printing Ink
6725 Gilead Street
Whitehouse, Ohio 43571

Re: Permit No. 03-48-0146

Attn: T. W. Shadle

DEC 2 1981

Dear Permittee:

Transmitted herewith is a certified copy of your Hazardous Waste Facility Installation and Operation Permit (Permit) as such permit was entered into the Journal of the Board. The permit consists of the following:

- 1) The standardized permit form (Findings and Conclusions and Issuance).
- 2) Terms and Conditions as approved by the Board (Special Terms and Conditions applicable to all permittees and Special Terms and Conditions for specific facilities).
- 3) Portions of the approved Part A permit application indicating the approved hazardous waste processes and design capacities and those hazardous wastes, identified by U.S. EPA Hazardous Waste Number, to be managed at the facility.

Processes, design capacities, and/or specific hazardous wastes which are stricken through or crossed out on the Part A permit application are not included in the approved permit. Unless otherwise notified by certified mail and afforded the opportunity for an adjudication hearing before the Board, all such deletions have occurred with the authorization of the applicant or his representative.

You are encouraged to carefully read the permit in its entirety. Any questions or comments concerning its content should be addressed to:

Ms. Peggy J. Vince
Executive Director
Hazardous Waste Facility Approval Board
P.O. Box 1049
361 East Broad Street
Columbus, OH 43216
Ph: (614) 462-6981

HAZARADOUS WASTE FACILITY
APPROVAL BOARD

DEC 2 1981

ENTERED BOARD'S JOURNAL

EPA 9003

HAZARADOUS WASTE FACILITY
APPROVAL BOARD

DEC 2 1981

ENTERED BOARD'S JOURNAL

YOU ARE HEREBY ADVISED THAT: All appeals of these matters are to the Court of Appeals of Franklin County, 369 South High St., Columbus, Ohio 43215, Attn: Deputy Clerk, and shall be pursuant to the provisions of Section 3734.05(C)(7) of the Revised Code.

Sincerely,

Peggy J. Vince

Peggy J. Vince
Executive Director

PJV/ss

Enclosure

HAZARADOUS WASTE FACILITY
APPROVAL BOARD

DEC 2 1981

ENTERED BOARD'S JOURNAL

STATE OF OHIO

HAZARDOUS WASTE FACILITY APPROVAL BOARD

In the Matter of:

Borden Chemical Printing Ink
6725 Gilead Street
Whitehouse, Ohio 43571

Permit No. 03-48-0146

Applicant/Permittee

The operator of the below-
referenced hazardous waste
facility

Borden Chemical Printing Ink
6725 Gilead Street
Whitehouse, Ohio 43571

Facility

HAZARADOUS WASTE FACILITY
APPROVAL BOARD

DEC 2 1981

ENTERED BOARD'S JOURNAL

Pursuant to Section 3734.05(D) of the Revised Code, The Hazardous Waste Facility Approval Board (Board) makes the following Findings and Conclusions and issues a Hazardous Waste Facility Installation and Operation Permit (Permit)

FINDINGS AND CONCLUSIONS

1. The Applicant has submitted to the Board a completed permit application, stating the facility was in operation immediately prior to October 9, 1980, and has paid the required permit fee.
2. The Ohio Environmental Protection Agency (Agency) and/or the United States Environmental Protection Agency has inspected the facility and has prepared an Interim Status Standards Survey (survey).
3. All public comments timely received have been reviewed, evaluated and considered by the Board and the Agency for their relevancy and materiality.
4. The Agency has reviewed and considered the information on the permit application, the results of the survey, the public comments, and other pertinent material and has concluded that the facility was in substantial compliance, as determined by the Director of Environmental Protection, with applicable statutes and rules in effect immediately prior to October 9, 1980.

5. The Agency has informed the Applicant of the requirements of applicable hazardous waste rules of which it was not in compliance.
6. The Agency has recommended to the Board that a permit be issued to the facility.
7. Review and consideration of the information on the permit application, the results of the survey, the public comments, recommendations and comments by the Agency, and other pertinent material regarding the Applicant and the facility is sufficient to determine whether the facility meets the requirements for permit issuance set forth in Section 3734.05(D) of the Revised Code.
8. The staff of the Board has reviewed and considered the information on the permit application, the results of the survey, the public comments, the recommendation and comments by the Agency, and other pertinent material regarding the Applicant and the facility and has recommended to the Board that a permit be issued.
9. Pursuant to Resolution No. 168-81, passed September 15, 1981, the Board found that the facility:
 - a. Was in operation immediately prior to October 9, 1980,
 - b. Was in substantial compliance, as determined by the Director of Environmental Protection, with applicable statutes and rules in effect immediately prior to October 9, 1980,
 - c. Submitted a completed permit application, and
 - d. Has demonstrated to the Board that its operation after October 9, 1980 will comply with applicable performance standards adopted by the Director of Environmental Protection pursuant to division (D) of Section 3734.12 of the Revised Code.
10. Pursuant to such Resolution, the Board resolved and approved that a permit be issued with such standard terms and conditions set forth in the document entitled "Terms and Conditions" attached to the Resolution and such special terms and conditions as were approved by the Board.
11. The terms and conditions referenced in Finding Number 10 above, are attached hereto and incorporated herein.
12. Resolution No. 21-81, passed on August 26, 1981 and entered into the Journal of the Board on September 1, 1981, authorizes the Coordinator of the Board to:

HAZARADOUS WASTE FACILITY
APPROVAL BOARD

DEC 2 1981

ENTERED BOARD'S JOURNAL

- a. Authorize the staff of the Board to issue to the facilities the Hazardous Waste Facility Installation and Operation Permits approved for issuance by resolution of the Board, and
- b. Have signing authority indicating that such action has been approved by the Board.

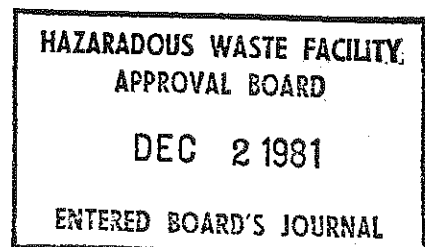
NOW THEREFORE, A HAZARDOUS WASTE FACILITY INSTALLATION AND OPERATION PERMIT IS ISSUED TO THE Applicant for the facility, subject to the Terms and Conditions attached hereto and incorporated herein.

FOR THE BOARD, BY
ORDER OF THE BOARD

Peggy J. Vince Dec. 2, 1981

Entered into the Journal of the Board on Dec 2, 1981 by

Madeline Samson/sec.



81-HW-0146

FORM 1 GENERAL	 ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)	I. EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px;"> F O H D 0 0 5 0 4 3 7 4 0 </div>																																																						
II. POLLUTANT CHARACTERISTICS <p>INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">SPECIFIC QUESTIONS</th> <th colspan="3">MARK "X"</th> <th rowspan="2">SPECIFIC QUESTIONS</th> <th colspan="3">MARK "X"</th> </tr> <tr> <th>YES</th> <th>NO</th> <th>FORM ATTACHED</th> <th>YES</th> <th>NO</th> <th>FORM ATTACHED</th> </tr> </thead> <tbody> <tr> <td>A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)</td> <td></td> <td>X</td> <td></td> <td>B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)</td> <td></td> <td>X</td> <td></td> </tr> <tr> <td>C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)</td> <td></td> <td>X</td> <td></td> <td>D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)</td> <td></td> <td>X</td> <td></td> </tr> <tr> <td>E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)</td> <td>X</td> <td></td> <td>X</td> <td>F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)</td> <td></td> <td>X</td> <td></td> </tr> <tr> <td>G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production; inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)</td> <td></td> <td>X</td> <td></td> <td>H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)</td> <td></td> <td>X</td> <td></td> </tr> <tr> <td>I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)</td> <td></td> <td>X</td> <td></td> <td>J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)</td> <td></td> <td>X</td> <td></td> </tr> </tbody> </table>		SPECIFIC QUESTIONS	MARK "X"			SPECIFIC QUESTIONS	MARK "X"			YES	NO	FORM ATTACHED	YES	NO	FORM ATTACHED	A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X		C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X		E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X		G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production; inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X		I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect through it and enter the correct data. If the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.
SPECIFIC QUESTIONS	MARK "X"			SPECIFIC QUESTIONS	MARK "X"																																																			
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED																																																	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X																																																		
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X																																																		
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X																																																		
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production; inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X																																																		
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X																																																		

III. NAME OF FACILITY			
1	SKIP	Borden Chemical Printing Ink	
IV. FACILITY CONTACT			
A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)	
2	Shadle, TW	Lab Production Mgr.	419 877 5392
V. FACILITY MAILING ADDRESS			
A. STREET OR P.O. BOX			
3	6725 Gilead Street		
B. CITY OR TOWN			
4	Whitehouse		
C. STATE		D. ZIP CODE	
OH		4357	
VI. FACILITY LOCATION			
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
5	Same		
B. COUNTY NAME			
LUCAS			
C. CITY OR TOWN			
6			
D. STATE		E. ZIP CODE	F. COUNTY CODE (if known)

HAZARDOUS WASTE FACILITY

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VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	2	8	9	3	(specify)	7	(specify)
C. THIRD				D. FOURTH			
(specify)				(specify)			

0146

III. OPERATOR INFORMATION

A. NAME												B. Is the name listed in Item VIII-A also the owner?	
Borden Inc												<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)													
F = FEDERAL				M = PUBLIC (other than federal or state)				P (specify)		D. PHONE (area code & no.)			
S = STATE				O = OTHER (specify)						6 1 4 2 2 5 4 0 0 0			
P = PRIVATE													
E. STREET OR P.O. BOX													
180 E. Broad Street													
F. CITY OR TOWN													
Columbus													
G. STATE													
OH													
H. ZIP CODE													
43215													
IX. INDIAN LAND													
Is the facility located on Indian lands?													
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO													

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)												D. PSD (Air Emissions from Proposed Sources)											
9 N												9 P											
B. UIC (Underground Injection of Fluids)												E. OTHER (specify)											
9 U												(specify)											
C. RCRA (Hazardous Wastes)												E. OTHER (specify)											
9 R												(specify)											

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The mixing, blending and dispersing of colorants into printing inks and servicing of the printing industry.

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XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
Robert W. Gutheil, President		<i>Robert W. Gutheil</i>		11/17/80	
COMMENTS FOR OFFICIAL USE ONLY					

81-HW-0146

FORM RCRA		U.S. ENVIRONMENTAL PROTECTION AGENCY DANGEROUS WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3005 of RCRA.)	1. EPA I.D. NUMBER FOH D 00 50 43 74 0
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FOR OFFICIAL USE ONLY		COMMENTS
APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	

II. FIRST OR REVISED APPLICATION
Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility (or revised application). If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)		2. NEW FACILITY (Complete item below.)	
<input checked="" type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)		<input type="checkbox"/> 2. NEW FACILITY (Complete item below.)	
FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)		FOR NEW FACILITY PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE EXPECTED TO BEGIN	
C. YR. MO. DAY 8 5 8 0 3		C. YR. MO. DAY 73 74 75 76 77 78	
B. REVISED APPLICATION (place an "X" below and complete item I above)		2. FACILITY HAS A RCRA PERMIT	
<input type="checkbox"/> 1. FACILITY HAS INTERIM STATUS		<input type="checkbox"/> 2. FACILITY HAS A RCRA PERMIT	

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.
1. AMOUNT - Enter the amount.
2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS			GALLONS PER HOUR OR LITERS PER HOUR
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
		UNIT OF MEASURE CODE			UNIT OF MEASURE CODE
		GALLONS.....G			LITERS PER DAY.....V
		LITERS.....L			TONS PER HOUR.....D
		CUBIC YARDS.....Y			METRIC TONS PER HOUR.....W
		CUBIC METERS.....C			GALLONS PER HOUR.....E
		GALLONS PER DAY.....U			LITERS PER HOUR.....H

OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)

DANGEROUS WASTE FACILITY APPROVAL BOARD

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ENTERED DEPT. OF ENVIRONMENTAL PROTECTION

ACRE-FEET.....F
HECTARE-METER.....I
ACRES.....J
HECTARES.....K

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)			1. AMOUNT	2. UNIT OF MEASURE (enter code)
X-1	S 0 2	600	G	5			
X-2	T 0 3	20	E	6			
1	S 0 1	200	G	7			
2		20,000	U	8			
3		100	U	9			
4				10			

This capacity will be changed on the revision to 20,000 per phone conversation on Sept 11, 1981 George W. Davis

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

**HAZARADOUS WASTE FACILITY
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IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE

POUNDS **P**
TONS **T**

CODE**METRIC UNIT OF MEASURE**

KILOGRAMS **K**
METRIC TONS **M**

CODE

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO. JZ	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
	D 0 0 2				included with above

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EPA I.D. NUMBER (enter from page 1)										FOR OFFICIAL USE ONLY									
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
W	H	D	0	0	5	0	4	3	7	4	0								

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	K 0 8 6	54,000	P	S 0 1 S 0 2	will be deleting in submission of Revised List-A as per phone conversation with Mr. Shadle Sept. 2, 1981 mly Richard
2					
3					
4					
5					
6					
7					
8					
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25					
26					

HAZARADOUS WASTE FACILITY
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IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

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EPA I.D. NO. (enter from page 1)

F	O	H	D	0	0	5	0	4	3	7	4	0	T/A	C
														6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

4	1	3	1	0	5	0
65	55	57	54	65	71	

LONGITUDE (degrees, minutes, & seconds)

0	8	3	4	8	0	3	0
72	74	78	78	77	70		

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

E	Borden Inc
13	16

6	1	4	-	2	2	5	-	4	2	9	2
31	38	38		59	61	52		56			

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

F	180 E Broad St.
13	16

G	Columbus
49	13

0	14
40	41

4	3	2	1	5
47				51

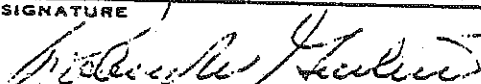
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

 Robert W. Gulheil, President
Borden Chemical

B. SIGNATURE



C. DATE SIGNED

11/17/80

X. OPERATOR CERTIFICATION

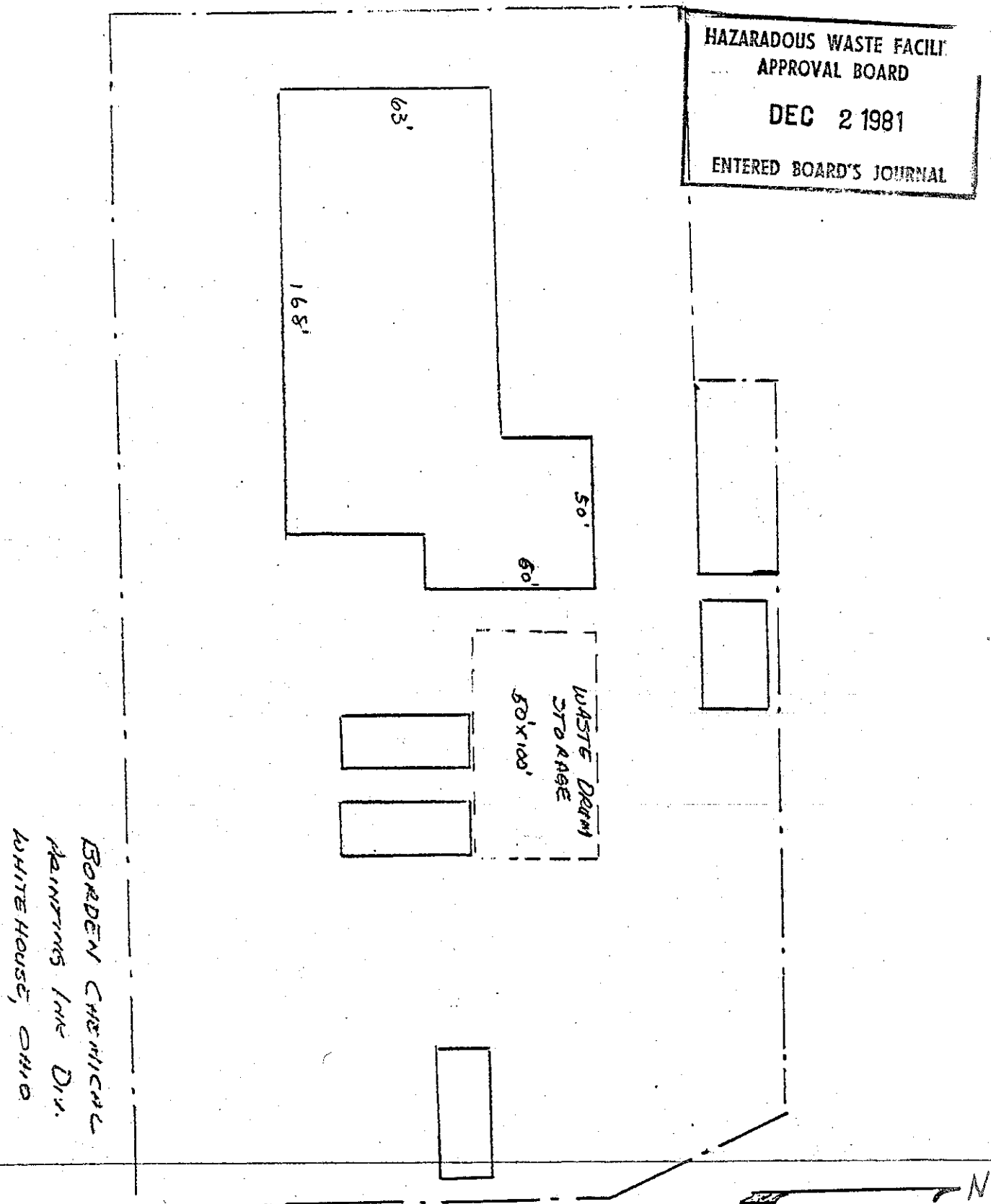
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

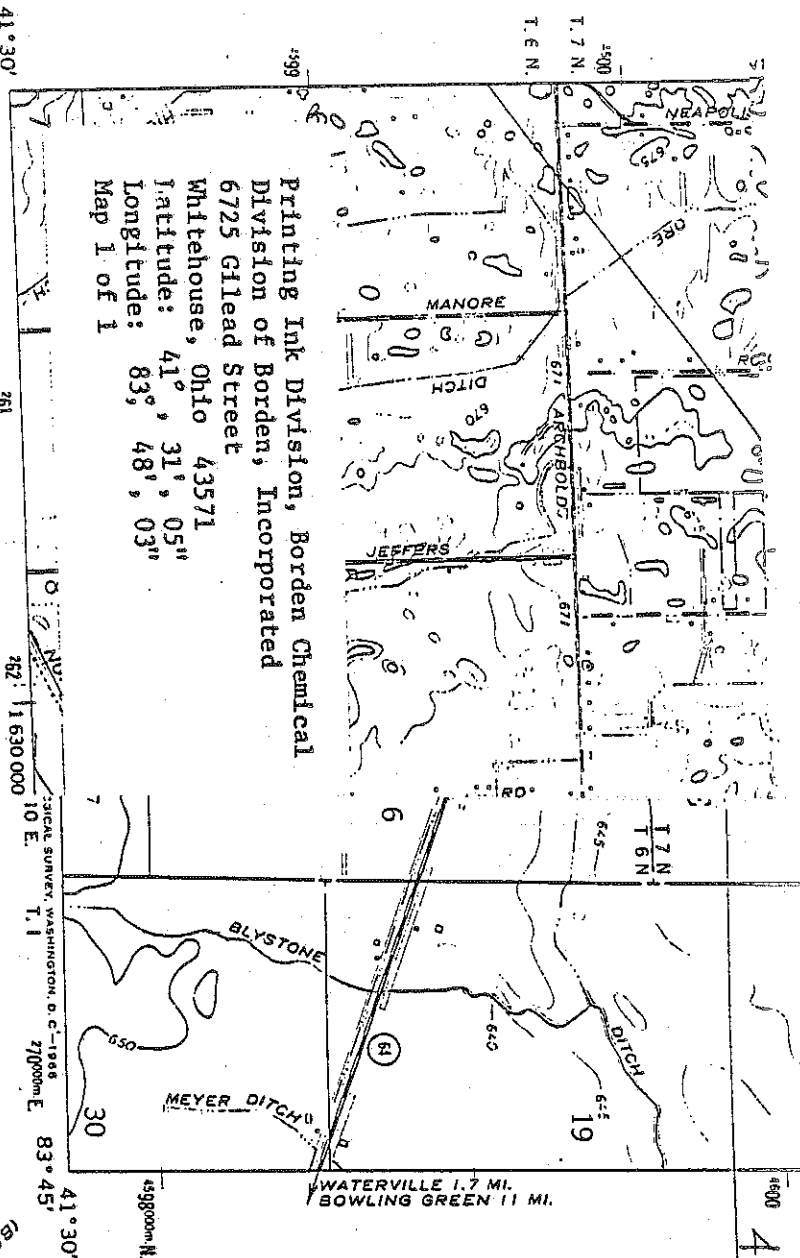
C. DATE SIGNED

V. FACILITY DRAWING (see page 4)



COLTON
1:250,000

41°30'
83°52'30"



Printing Ink Division, Borden Chemical
Division of Borden, Incorporated
6725 Gilead Street
Whitehouse, Ohio 43571
Latitude: 41° 31' 05"
Longitude: 83° 48' 03"
Map 1 of 1

Mapped, edited, and published by the Geological Survey
Control by USGS and USC&GS



Topography by planetable surveys 1925. Revised 1964

Polyconic projection. 1927 North American datum
10,000-foot grid based on Ohio coordinate system, north zone
1000-meter Universal Transverse Mercator grid ticks.

zone 17, shown in blue

Land lines south of Fulton Line based on the First Principal Meridian
Land lines north of Fulton Line based on the Michigan Meridian
Fine red dashed lines indicate selected fence and field lines where
generally visible on aerial photographs. This information is unchecked

JAD CLASSIFICATION

- Light-duty —————
- Unimproved dirt =====
- U.S. Route 
- State Route 

WHITEHOUSE, OHIO

SE/4 SW/4 15' QUADRANGLE
N4130—W8345/7.5

1964

AMS 4267 III SE—SERIES V852

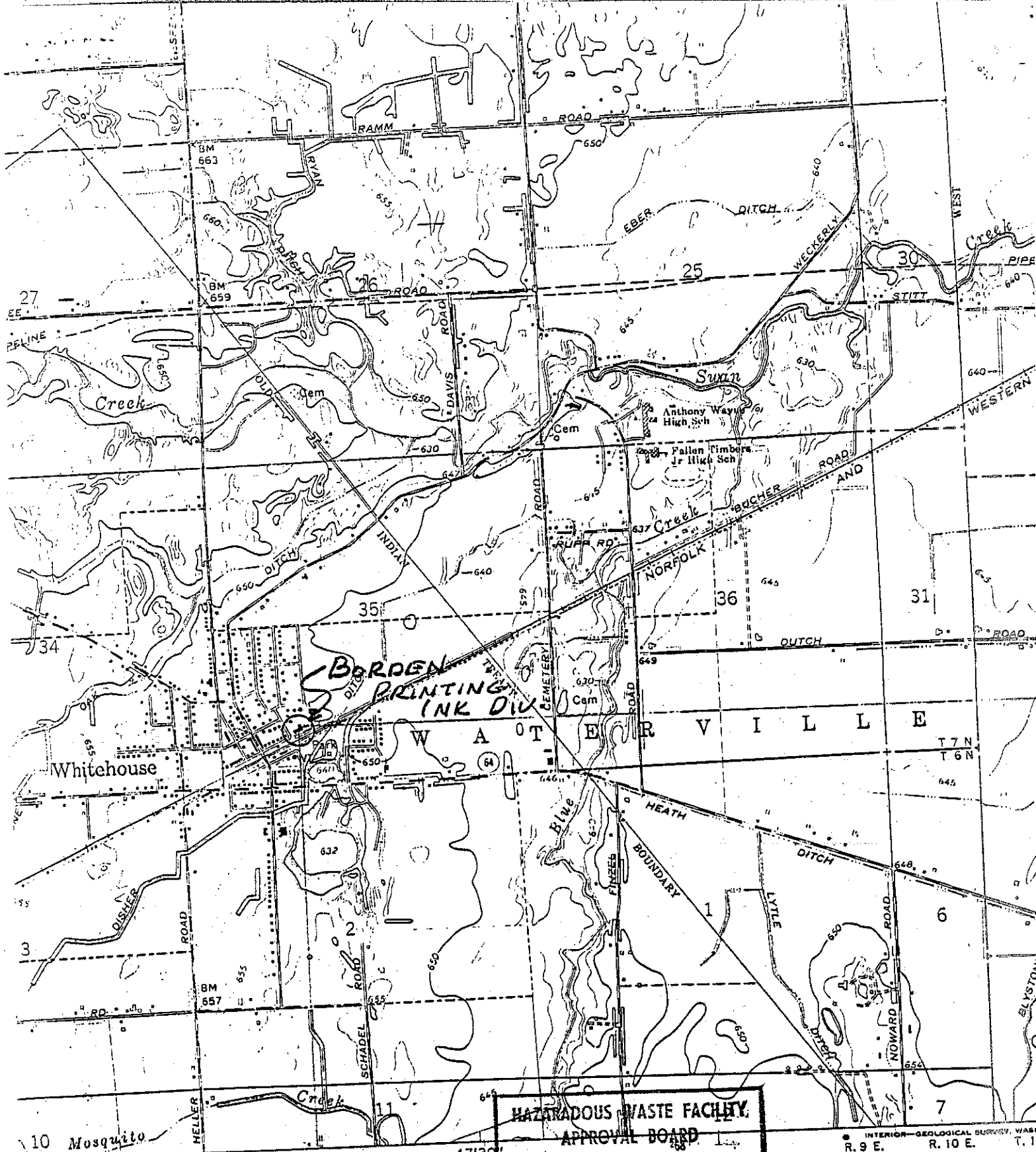
(BOWLING GREEN
NORTH)
4266 NW

**HAZARADOUS WASTE FACILITY
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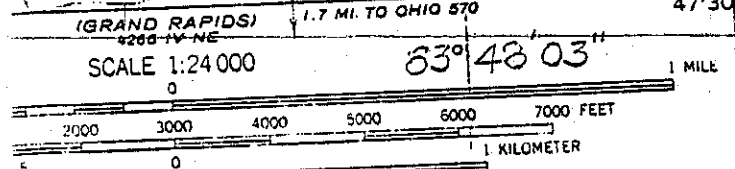
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SCHWABERGER RD

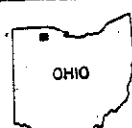


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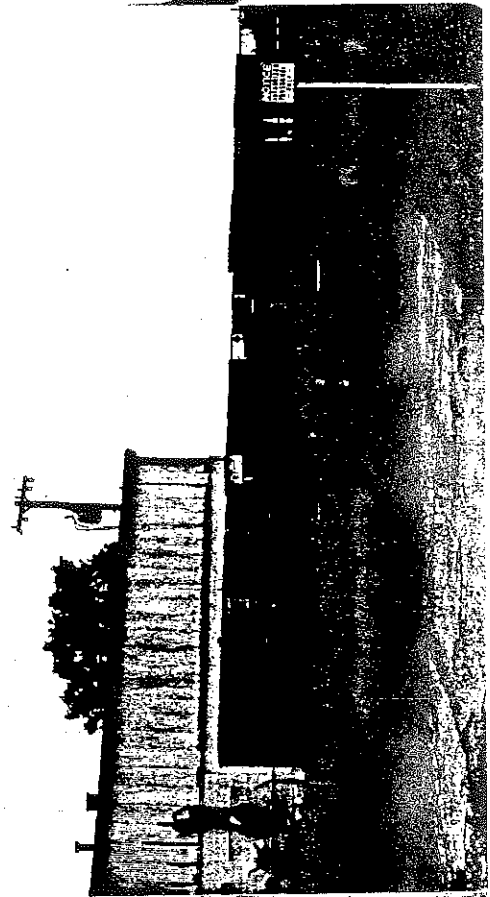


INTERIOR-GEOLOGICAL SURVEY, WASH.
R. 9 E. R. 10 E. T. 1
ROAD CLASSIFICATION
Heavy-duty ——— Lig
Medium-duty ——— Un
○ Interstate Route J.S.

CONTOUR INTERVAL 5 FEET
DATUM IS MEAN SEA LEVEL



WHIT



HAZARADOUS WASTE FACILITY
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TERMS AND CONDITIONS (General)

1. Only those hazardous wastes as identified by the U.S. EPA Hazardous Waste Number(s) set forth in the approved permit application, attached hereto, may be managed at the facility and only pursuant to the specified processes and design capacities indicated and set forth in the approved permit application.
2. The Permittee and the facility shall comply with all applicable performance standards adopted by the Director of Environmental Protection pursuant to Division (D) of Section 3734.12 of the Revised Code.
3. The Permittee and the facility shall comply with all applicable requirements of Chapter 3734 of the Revised Code, the Ohio Hazardous Waste Rules, and the federal statutes and regulations concerning hazardous waste.
4. This permit shall expire three years after its date of issuance. The date of issuance is the date the resolution to issue the permit was passed by the Board.
5. This permit, in accordance with the procedures of the Board, may be modified, revoked, or alternatively revoked and reissued, to comply with applicable provisions of Chapter 3734 of the Revised Code or the Ohio Hazardous Waste Rules.
6. The annual permit fee, payable to the Treasurer of State, shall be submitted to and received by the Board on or before the anniversaries of the date of issuance, during the term of the permit.
7. Unless otherwise specifically provided, all studies, reports, data, plans and other information required to be submitted by this permit shall be transmitted to:

Hazardous Waste Facility Approval Board
P.O. Box 1049
361 East Broad Street
Columbus, Ohio 43216

The permit number shall be indicated on the transmittal letter.

TERMS AND CONDITIONS (Special)

NOT APPLICABLE

HAZARADOUS WASTE FACILITY
APPROVAL BOARD

DEC 2 1981

ENTERED BOARD'S JOURNAL

ST. IDENTIFICATION NUMBER

8Y-HW- 0146

EPA IDENTIFICATION NUMBER

OH D005043740

TREATMENT, STORAGE, AND DISPOSAL FACILITIES
Form A.- General Facility Standards

I. General Information:

- (A) Facility Name: Borden Chemical Printing Ink
- (B) Street: 6725 Gilead St.
- (C) City: Whitehouse (D) State: OH (E) Zip Code: 43571
- (F) Phone: 419-877-5392 (G) County: LUCAS
- (H) Operator: Same as above
- (I) Street: _____
- (J) City: _____ (K) State: _____ (L) Zip Code: _____
- (M) Phone: _____ (N) County: _____
- (O) Owner: Borden Inc.
- (P) Street: 180 E. Broad St.
- (Q) City: Cols. (R) State: OH (S) Zip Code: 43215
- (T) Phone: 614-225-4000 (U) County: Franklin
- (V) Date of Inspection: 8-26-81 (W) Time of Inspection (From) 10:00 (To) 12:00
- (X) Weather Conditions: Fair, 80°

(Y) Person(s) Interviewed

Thomas W. Shadle

Title

Lobl Production Mgr

Telephone

419 787 5392

(Z) Inspection Participants

Dave Ferguson

Agency/Title

Telephone

(AA) Preparer Information

Name

Dave Ferguson

Agency/Title

OEPA, ES

Telephone

419-352-8461

II. SITE ACTIVITY:

Complete sections I through VII for all treatment, storage, and/or disposal facilities. Complete the forms (in parenthesis) in section VIII corresponding to the site activities identified below:

 A. Storage and/or Treatment

- 1. Containers (I)
- 2. Tanks (J)
- 3. Surface Impoundments (K)
- 4. Waste Piles (L)

 B. Land Treatment (M)

 C. Landfills (N)

 D. Incineration and/or Thermal Treatment
(O and P)

 E. Chemical, Physical, and Biological
Treatment (Q)

Note: If facility is also a generator or transporter of hazardous waste complete sections IX and X of this form as appropriate.

III. GENERAL FACILITY STANDARDS:
(Part 265 Subpart B)

	Yes	No	NI*	Remark
(A) Has the Regional Administrator been notified regarding:				
1. Receipt of hazardous waste from a foreign source?	N/A	X	—	_____
2. Facility expansion?	N/A	X	—	_____
(B) General Waste Analysis:				
1. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	X	—	—	_____
2. Does the owner or operator have a detailed waste analysis plan on file at the facility?	X	—	—	_____
3. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	X	—	—	_____
(C) Security - Do security measures include: (if applicable)				
1. 24-Hour surveillance?	—	X	—	ADT Alarm
2. Artificial or natural barrier around facility?	X	—	—	_____
3. Controlled entry?	X	—	—	_____
4. Danger sign(s) at entrance?	—	X	—	On Order
(D) Do Owner or Operator Inspections Include:				
1. Records of malfunctions?	X	—	—	_____
2. Records of operator error?	X	—	—	_____
Records of discharges?	X	—	—	_____

*Not Inspected

III. GENERAL FACILITY STANDARDS - Continued

	Yes	No	NI*	Remarks
4. Inspection schedule?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Safety, emergency equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Security devices?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Operating and structural devices?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Inspection log?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(E) Do personnel training records include: (Effective 5/19/81)				
1. Job titles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Job descriptions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Description of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Records of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Have facility personnel received required training by 5-19-81?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Do new personnel receive required training within six months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(F) If required are the following special requirements for ignitable, reactive, or incompatible wastes addressed?				
1. Special handling?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. No smoking signs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Separation and protection from ignition sources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Not Inspected

IV. PREPAREDNESS AND PREVENTION:
(Part 265 Subpart C)

(A) Maintenance and Operation
of Facility:

Is there any evidence of fire, explosion, or release of hazardous waste or hazardous waste constituent?

Yes	No	NI*	Remarks
-----	----	-----	---------

X

(B) If required, does the facility have the following equipment:

1. Internal communications or alarm systems?
2. Telephone or 2-way radios at the scene of operations?
3. Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?

~~SECRET~~ ~~SECRET~~ ~~SECRET~~ ~~SECRET~~

Indicate the volume of water and/or foam available for fire control:

On City Water

(C) Testing and Maintenance of
Emergency Equipment:

1. Has the owner or operator established testing and maintenance procedures for emergency equipment?
2. Is emergency equipment maintained in operable conditions?

~~X~~ — — Fyrex, 6mth inspec

- (D) Has owner or operator provided immediate access to internal alarms? (if needed)

~~CONFIDENTIAL~~

(E) Is there adequate aisle space
for unobstructed movement?

X — — —

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES:
(Part 265 Subpart D)

(A) Does the Contingency Plan contain the
following information:

Yes No NI* Remarks

1. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Counter-measures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)
2. Arrangements agreed by local police departments, fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?
3. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?
4. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?
5. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)

X — — —

X — — —

X — — —

X — — —

X — — —

*Not Inspected

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES - Continued

	Yes	No	NI*	Remarks
(B) Are copies of the Contingency Plan available at site and local emergency organizations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(C) Emergency Coordinator				
1. Is the facility Emergency Coordinator identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is coordinator familiar with all aspects of site operation and emergency procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(D) Emergency Procedures				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

VI. MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING
(Part 265 Subpart E)

	Yes	No	NI*	Remarks
(A) Use of Manifest System				
1. Does the facility follow the procedures listed in §265.71 for processing each manifest?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Chem Met, Wyandot, M.</i>
2. Are records of past shipments retained for 3 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(B) Does the owner or operator meet requirements regarding manifest discrepancies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

(C) Operating Record

1. Does the owner or operator maintain an operating record as required in 265.73?

X — — —

2. Does the operating record contain the following information:

**b. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in Appendix I?

X — — —

c. The location and quantity of each hazardous waste within the facility?

X — — —

***d. A map or diagram of each cell or disposal area showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

N/A — — —

e. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

X — — —

f. Reports detailing all incidents that required implementation of the Contingency Plan?

N/A — — —

g. All closure and post closure costs as applicable? (Effective 5-19-81)

X — — —

** See page 33252 of the May 19, 1980, Federal Register.

*** Only applies to disposal facilities

VII. CLOSURE AND POST CLOSURE
(Part 265 Subpart G)

	Yes	No	NI*	Remarks
(A) Closure and Post Closure				
1. Is the facility closure plan available for inspection by May 19, 1981?	<u>X</u>	—	—	_____
2. Has this plan been submitted to the Regional Administrator	—	<u>X</u>	—	_____
3. Has closure begun?	—	<u>X</u>	—	_____
4. Is closure estimate available by May 19, 1981?	<u>X</u>	—	—	_____
(B) Post closure care and use of property				
Has the owner or operator supplied a post closure monitoring plan? (effective by May 19, 1981)				
			<u>N/A</u>	_____

VIII. FACILITY STANDARDS
(Part 265, Subparts I thru R)

I
USE AND MANAGEMENT OF CONTAINERS

Facility Name: Baden Date of Inspection: 8-26-81

	Yes	No	NI*	Remarks
1. Are containers in good condition?	<u>X</u>	—	—	_____
2. Are containers compatible with waste in them?	<u>X</u>	—	—	_____
3. Are containers stored closed?	<u>X</u>	—	—	_____
4. Are containers managed to prevent leaks?	<u>X</u>	—	—	_____
5. Are containers inspected weekly for leaks and defects?	<u>X</u>	—	—	_____
6. Are ignitable & reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive.)	<u>X</u>	—	—	_____

	Yes	No	NI*	Remarks
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply.)	---	---	---	-----
8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	---	---	---	-----

J
TANKS

Facility Name: _____ Date of Inspection: _____

1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank?	---	---	---	-----
2. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, or dikes or other containment structures?	---	---	---	-----
3. Do continuous feed systems have a waste-feed cutoff?	---	---	---	-----
4. Are waste analyses done before the tanks are used to store a substantially different waste than before?	---	---	---	-----
5. Are required daily and weekly inspections done?	---	---	---	-----
6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)	---	---	---	-----
7. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR 265.17(b) apply.)	---	---	---	-----

*Not Inspected

Yes No NI* Remarks

8. Has the owner or operator observed the National Fire Protection Association's buffer zone requirements for tanks containing ignitable or reactive wastes?

Tank capacity: _____ gallons

Tank diameter: _____ feet

Distance of tank from property line _____ feet

(See table 2 - 1 through 2 - 6 of NFPA's "Flammable and Combustible Liquids Code - 1977" to determine compliance.)

K
SURFACE IMPOUNDMENTS

Facility Name: _____

Date of Inspection: _____

- | | | | | |
|--|-------|-------|-------|-------|
| 1. Do surface impoundments have at least 60 cm (2 feet) of freeboard? | _____ | _____ | _____ | _____ |
| 2. Do earthen dikes have protective covers? | _____ | _____ | _____ | _____ |
| 3. Are waste analyses done when the impoundment is used to store a substantially different waste than before? | _____ | _____ | _____ | _____ |
| 4. Is the freeboard level inspected at least daily? | _____ | _____ | _____ | _____ |
| 5. Are the dikes inspected weekly for evidence of leaks or deterioration? | _____ | _____ | _____ | _____ |
| 6. Are reactive & ignitable wastes rendered non-reactive or non-ignitable before storage in a surface impoundment? (If waste is rendered non-reactive or non-ignitable, see treatment requirements.) | _____ | _____ | _____ | _____ |
| 7. Are incompatible wastes stored in different impoundments? (If not, the provisions of 40 CFR 265.17(b) apply.) | _____ | _____ | _____ | _____ |

L
WASTE PILES

Facility Name: _____

Date of Inspection: _____

	Yes	No	NI*	Remarks
1. Are waste piles covered or protected from dispersal by wind?	---	---	---	-----
2. Is each in-coming movement of waste analyzed before being added to the waste pile?	---	---	---	-----
3. Are leachate, run-off, and run-on controlled as per the requirements of 265.258? (The effective date of this provision is Nov. 19, 1981.)	---	---	---	-----
4. Are reactive & ignitable wastes rendered non-reactive or non-ignitable before storage in a pile? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)	---	---	---	-----
5. Are piles of reactive or ignitable waste protected from materials or conditions that might cause them to ignite or react?	---	---	---	-----
6. Are incompatible wastes stored in different piles? (If not, the provisions of 40 CFR 265.17(b) apply.)	---	---	---	-----
7. Are piles of incompatible waste protected by barriers or distance from other waste?	---	---	---	-----

*Not Inspected

LAND TREATMENT

Facility Name: _____ Date of Inspection: _____

1. Is treated hazardous waste capable of biological or chemical degradation?

2. Are run-off and run-on diverted from the facility or collected?
 (Effective date: November 19, 1981)?

3. Is waste analyzed according to 265.273?

4. If food chain crops are grown at the facility, has the owner or operator addressed the requirements of 265.276?

5. Is an unsaturated zone monitoring plan designed and implemented to detect the vertical migration of hazardous waste and provide information on the background concentrations of the hazardous waste available?

6. Does the unsaturated zone monitoring plan address the minimum information specified in 265.278?

7. Are records kept regarding application dates and rates, quantities, and locations, of all hazardous waste placed in the facility?

8. Are the special requirements fulfilled regarding land treatment of ignitable or reactive wastes? (Indicate if waste is ignitable or reactive.)

9. Are incompatible wastes land treated? (If yes, 265.17(b) applies)

N
LANDFILLS

Facility Name: _____ Date of Inspection: _____

Yes No NI* Remarks

(A) General Operating Requirements
Does the facility provide the following:

- | | | | | |
|---|-----|-----|-----|-------|
| **1. Diversion of run-on away from active portions of the fill? | --- | --- | --- | ----- |
| **2. Collection of run-off from active portions of the fill? | --- | --- | --- | ----- |
| **3. Is collected run off treated? | --- | --- | --- | ----- |
| 4. Control of wind dispersal of hazardous waste? | --- | --- | --- | ----- |
- (**Effective 11-19-81)

(B) Surveying and Recordkeeping
Does the Operating Record Include:

- | | | | | |
|--|-----|-----|-----|-------|
| 1. A map showing the exact location and dimensions of each cell? | --- | --- | --- | ----- |
| 2. The contents of each cell and the location of each hazardous waste type within each cell? | --- | --- | --- | ----- |

(C) Closure and Post-Closure

- | | | | | |
|--|-----|-----|-----|-------|
| 1. Is the Closure Plan available for inspection by 5-19-81? | --- | --- | --- | ----- |
| 2. Has this plan been submitted to the Regional Administrator? | --- | --- | --- | ----- |
| 3. Has closure begun? | --- | --- | --- | ----- |
| 4. Is closure cost estimate available by 5-19-81? | --- | --- | --- | ----- |

(D) Special requirements for ignitable or reactive waste

Are ignitable or reactive waste treated so the resulting mixture is no longer ignitable or reactive?	---	---	---	-----
--	-----	-----	-----	-------

	Yes	No	NI*	Remarks
(If waste is rendered non-reactive or non-ignitable see treatment requirements)				
If not, the provisions of 40 CFR 265.17(b) apply.				
(E) Special Requirements for Incompatible Wastes.				
Does the owner or operator dispose of incompatible wastes in separate cells?				
If not, the provisions of 40 CFR 265.17(b) apply.				
(F) Special requirements for liquid waste (effective 11-19-81)				
1. Are bulk or non-containerized liquids placed in the landfill?				
2. Does the landfill have a chemically and physically resistant liner system?				
3. Does the landfill have a functional leachate collection system?				
4. Are free liquids stabilized prior to or immediately after placement in the landfill?				
(G) Special requirements for Containers (effective 11-19-81)				
Are empty containers crushed flat, shredded, or similarly reduced in volume before being buried beneath the surface of the landfill?				

O and P
INCINERATION and THERMAL TREATMENT

(A) Facility Name: _____

(B) Date of Inspection: _____

I. Determination of Steady State

A. Type of unit (i.e., type of incinerator or thermal treatment): _____

B. Components and steady state condition:

**** Was this component at SS prior to adding waste?

Component	Yes	No	NI*	Remarks
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

II. Waste Analysis

A. Minimum requirements, for wastes not previously burned/treated.

1. Required analyses; has an analysis been performed for the following?	Yes	No	NI*	Remarks
a. Heating value	_____	_____	_____	_____
b. Halogen content	_____	_____	_____	_____
c. Sulfur content	_____	_____	_____	_____

*Not Inspected

Yes No NI* Remarks

2. Has documented or written data been substituted for analysis of either:

a. Lead?

b. Mercury?

1. List other parameters for which the waste is tested to enable owner or operator to establish steady state or determine the types of pollutants which may be emitted. (Note in Remarks any which you feel should be tested.)

Remarks

1. _____
2. _____
3. _____
4. _____
5. _____

III. Monitoring and Inspections

Yes No NI* Remarks

1. Are combustion/emission control instruments monitored at least every 15 minutes?

2. Is steady state maintained or corrections attempted?

3. Is stack plume observed at least hourly for normal color and opacity?

4. Did any stack observations made by owner or operator show a plume different than normal?**

5. If yes to D above, were corrections made to return emissions to normal appearance?**

6. Are the complete unit and associated equipment inspected daily for leaks, spills, and fugitive emissions?

7. Are emergency shutdown controls and system alarms checked daily for proper operation?

*Not Inspected

**Specify in Remarks for what period of time this was checked.

IV. Open Burning

A. Only complete this part if the facility open burns hazardous waste.

	Yes	No	NI*	Remarks
1. Does this facility burn <u>only</u> waste explosives? (A <u>No</u> answer means <u>other</u> hazardous waste is open-burned.)	_____	_____	_____	
2. If this facility open-burns waste explosives, does it burn the waste at a distance greater than or equal to the minimum specified distance (below)	_____	_____	_____	

Pounds of waste explosives or propellants	Minimum distance from open burning or detonation to the property of others		
0 to 100.....	204 m	670	ft
101 to 1,000.....	380 m	1,250	ft
1,001 to 10,000.....	530 m	1,730	ft
10,001 to 30,000.....	690 m	2,260	ft

Q

CHEMICAL, PHYSICAL and BIOLOGICAL TREATMENT

Facility Name: _____

Date of Inspection: _____

	Yes	No	NI*	Remarks
1. Is equipment used to treat only those wastes which will not cause leakage, corrosion, or premature failure?	_____	_____	_____	
2. Is a continuously fed system equipped with a means of hazardous waste inflow stoppage or control (e.g., cut-off system?)	_____	_____	_____	

	Yes	No	NI*	Remarks
Has the owner or operator addressed the waste analysis requirements of 265.402?	_____	_____	_____	_____
4. Are inspection procedures followed according to 265.403?	_____	_____	_____	_____
5. Are the special requirements fulfilled for ignitable or reactive wastes?	_____	_____	_____	_____
6. Are incompatible wastes treated? (If yes, 265.17(b) applies.)	_____	_____	_____	_____

Note: EPA has temporarily suspended the applicability of the requirements of the hazardous waste regulations in 40 CFR Parts 122, 264 and 265 to owners and operators of (1) wastewater treatment tanks that receive, store, and treat wastewaters that are hazardous waste or that generate, store or treat a wastewater treatment sludge which is a hazardous waste where such wastewaters are subject to regulation under Sections 402 or 307(b) of the Clean Water Act (33 U.S.C. 1251 et seq.) and (2) neutralization tanks, transport vehicles, vessels, or containers which neutralize wastes which are hazardous only because they exhibit the corrosivity characteristic under 40 CFR §261.22 or are listed as hazardous wastes in Subpart D of 40 CFR Part 261 only for this reason.

IX

Complete this section if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

1. MANIFEST REQUIREMENTS

	Yes	No	NI*	Remarks
(A) Does the operator have copies of the manifest available for review?	<u>X</u>	_____	_____	_____
(B) Do the manifest forms reviewed contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements)				
1. Manifest document number?	<u>X</u>	_____	_____	_____
2. Name, mailing address, telephone number, and EPA ID Number of Generator	<u>X</u>	_____	_____	_____

	Yes	No	NI*	Remarks
3. Name and EPA ID Number of Transporter(s)?	<u>X</u>	—	—	_____
4. Name, address, and EPA ID Number of Designated permitted facility and alternate facility?	<u>X</u>	—	—	_____
5. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<u>X</u>	—	—	_____
6. The total quantity of waste(s) and the type and number of containers loaded?	<u>X</u>	—	—	_____
7. Required certification?	<u>X</u>	—	—	_____
8. Required signatures?	<u>X</u>	—	—	_____
(C) Does the owner or operator submit exception reports when needed?	<u>X</u>	—	—	_____

2. PRE-TRANSPORT REQUIREMENTS

(A) Is waste packaged in accordance with DOT Regulations? (Required prior to movement of hazardous waste off-site)	<u>X</u>	—	—	_____
(B) Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required to movement of hazardous waste off-site)	<u>X</u>	—	—	_____
(C) If required, are placards available to transporters of hazardous waste?	<u>X</u>	—	—	_____

Omit Section 3 if the facility has interim status and its Part A permit application describes storage

3. On Site Accumulation

	Yes	No	NI*	Remarks
1. Are containers marked with start of accumulation date?	_____	_____	_____	_____
2. Are the containers of hazardous waste removed from installation before they can accumulate for more than 90 days?	_____	_____	_____	_____
3. Are wastes stored in containers managed in accordance with 40 CFR Part 265.174 and 265.176 (weekly inspections of containers, containers holding ignitable or reactive wastes located at least 15 meters (50 Feet) from facility's property line?	_____	_____	_____	_____
4. If wastes are stored in tanks, are the tanks managed according to the following requirements?				
a. Are tanks used to store only those wastes which will not cause corrosion leakage or premature failure of the tank?	_____	_____	_____	_____
b. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, dikes, or other containment structures?	_____	_____	_____	_____
c. Do continuous feed systems have a waste-feed cutoff?	_____	_____	_____	_____
d. Are required daily and weekly inspections done?	_____	_____	_____	_____
e. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? (If waste is rendered non-reactive or non-ignitable, see treatment requirements?	_____	_____	_____	_____
f. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR §265.17(b) apply)	_____	_____	_____	_____

VI. RECORDKEEPING and REPORTING
(Part 262, Subpart D)

	Yes	No	NI*	Remarks
(A) Are Manifests, Annual Reports, Exception Reports, and all test results and analyses retained for at least three years?	<u>X</u>	—	—	_____
(B) Has the generator submitted Annual Reports and Exception Reports as required?	<u>X</u>	—	—	_____

VII. INTERNATIONAL SHIPMENTS
(Part 262, Subpart E)

Has the installation imported or exported Hazardous Waste?	—	—	—	_____
--	---	---	---	-------

(If answered Yes, complete the following as applicable.)

- | | | | | |
|--|---|---|---|-------|
| 1. Exporting Hazardous waste, has a generator: | | | | |
| a. Notified the Administrator in writing? | — | — | — | _____ |
| b. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country? | — | — | — | _____ |
| c. Met the Manifest requirements? | — | — | — | _____ |
| 2. Importing Hazardous Waste, has the generator: | | | | |
| Met the manifest requirements? | — | — | — | _____ |

X
TRANSPORTER REQUIREMENTS
40 CFR Part 263

Complete this Section if the owner or operator transports hazardous waste.

I. MANIFEST SYSTEM AND RECORDKEEPING
(Subpart B)

	Yes	No	NI*	Remarks
Are copies of the completed manifests or shipping paper(s) available for review and retained for three years?	_____	_____	_____	_____

II. INTERNATIONAL SHIPMENTS

A. Does the transporter record on the manifest the date the waste left the U.S.?	_____	_____	_____	_____
B. Are signed completed manifest(s) on file?	_____	_____	_____	_____

V. MISCELLANEOUS

A. Does transporter transport hazardous waste into the U.S. from abroad?	_____	_____	_____	_____
B. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?	_____	_____	_____	_____

NOTE: If (A) or (B) were answered "Yes" then the Transporter is also a Generator and must comply with the Generator regulations.

*Not Inspected

REMARKS

Use this section to briefly describe site activities observed at the time of the inspection. Note any possible violations of Interim Status Standards.

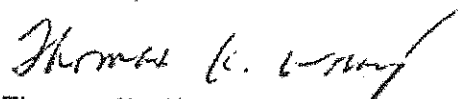
Borden Chemical Printing Ink
July 15, 1981
Page three

I recognize that this information is repetitious for many; however, it is included here for those who are not familiar with these regulations and the subsequent Amendments.

As mentioned earlier, the Ohio EPA is conducting inspections of those facilities engaged in the generation, transportation, storage, or disposal of hazardous waste. Your company has identified itself as a TSD. Therefore, an inspection has been tentatively scheduled sometime during the next two months. You will be contacted by telephone approximately a week prior to the inspection to arrange a definite meeting date.

For your benefit, I suggest you ensure your facility is in compliance with the applicable portions of these regulations as non-compliance will result in a notice of violation and a possible fine.

Sincerely,



Thomas K. Wray
Hazardous Waste Scientist

TKW:sd

Looking forward to meeting with you then.

Patricia Ferguson

1. EPA ID. NUMBER: F0H D005043740

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, fill it in the designated space. Review the information carefully; if any of it is incorrect, erase through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label area lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column. If the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X" IN THE BOX		
	YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)			X
D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)			X
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)			X
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)			X
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)			X

NAME OF FACILITY: Borden Chemical Printing Ink

VII. FACILITY CONTACT

A. NAME & TITLE (last, first, & title): Shadle, TW Lab Production Mgr.

B. PHONE (area code & no.): 419 877 5392

VIII. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: 725 Gilead Street

B. CITY OR TOWN: Whitehouse

C. STATE: OH

D. ZIP CODE: 43571

IX. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: Same

B. COUNTY NAME: CAS

C. CITY OR TOWN: [blank]

D. STATE: [blank]

E. ZIP CODE: [blank]

F. COUNTY CODE (if known): [blank]

2,8,9,3 (specify)															Printing Ink															7 (specify)				
C. THIRD															D. FOURTH																			
7 (specify)															7 (specify)																			

VIII. OPERATOR INFORMATION

A. NAME Borden Inc																														3. Is the name list Item VIII-A also owner? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.) F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P (specify)																									D. PHONE (area code & no.) 614 225 4000									
E. STREET OR P.O. BOX 180 E. Broad Street																																		
F. CITY OR TOWN Columbus																				G. STATE OH					H. ZIP CODE 43215					IX. INDIAN LAND Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water) 9 N															D. PSD (Air Emissions from Proposed Sources) 9 P														
B. DIC (Underground Injection of Fluids) 9 U															E. OTHER (specify) (specify)														
C. RCRA (Hazardous Wastes) 9 R															F. OTHER (specify) (specify)														

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The mixing, blending and dispersing of colorants into printing inks and servicing of the printing industry.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and its attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in this application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print) Robert W. Gutheil, President Borden Chemical, Co.																									B. SIGNATURE <i>Robert W. Gutheil</i>										C. DATE SIGNED 11/17/90				
COMMENTS FOR OFFICIAL USE ONLY																																							

U.S. RCRA Consolidated permits program (This information is required under Section 3005 of RCRA.) EPA Form 3510-3 (6-80)

FOR OFFICIAL USE ONLY

APPLICATION APPROVED DATE RECEIVED (yr. mo. & day)

COMML

FIRST OR REVISED APPLICATION

Enter an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

☐ 2. NEW FACILITY (Complete item below)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) CONSTRUCTION BEGAN OR EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete item 1 above)

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OF LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OF LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-Feet (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	CODE	UNIT OF MEASURE	UNIT OF MEASURE	CODE	UNIT OF MEASURE
GALLONS	G	LITERS PER DAY		V	ACRE-Feet
LITERS	L	TONS PER HOUR		D	HECTARE-METER
CUBIC YARDS	Y	METRIC TONS PER HOUR		W	ACRES
CUBIC METERS	C	GALLONS PER HOUR		E	HECTARES
GALLONS PER DAY	U	LITERS PER HOUR		H	

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons, other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

DUP

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY
1	2	3	4	5	6	7
X-1	S 0 2	600		5		
X-2	T 0 3	20		6		
1	S 0 1	100		7		
2	S 0 2	100		8		
3				9		
4				10		

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
 POUNDS P
 TONS T

METRIC UNIT OF MEASURE CODE
 KILOGRAMS K
 METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO. X-1 X-2 X-3 X-4	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

WO H D O O O O 4 3 7 4 0 1
 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

W

DUP

DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

D. PROCESSES

1	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))	
				27	28	29	30	31	32	33	34		
1	K 0 8 6	54,000	P	S	0	1	S	0	2				
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
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17													
18													
19													
20													
21													
22													
23													
24													
25													

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

All existing facilities must include photographs (*aerial or ground-level*) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (*see instructions for more detail*).

LATITUDE (degrees, minutes, & seconds)

4	1	3	1	0	5	0
55	66	57	65	68	7	74

LONGITUDE (degrees, minutes, & seconds)

0	8	3	4	8	0	3	0
72	-	7	75	76	77	-	7

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code &)

Borden Inc

6	1	4	-	2	2	5	-	4	2	5
---	---	---	---	---	---	---	---	---	---	---

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. 57

6. ZIP CODE

180 E Broad St.

Columbus

OK

4	3	2	1	5
---	---	---	---	---


I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

Robert W. Guthrie, President
Gorden Chemical

SIGNATURE 

44/17/80

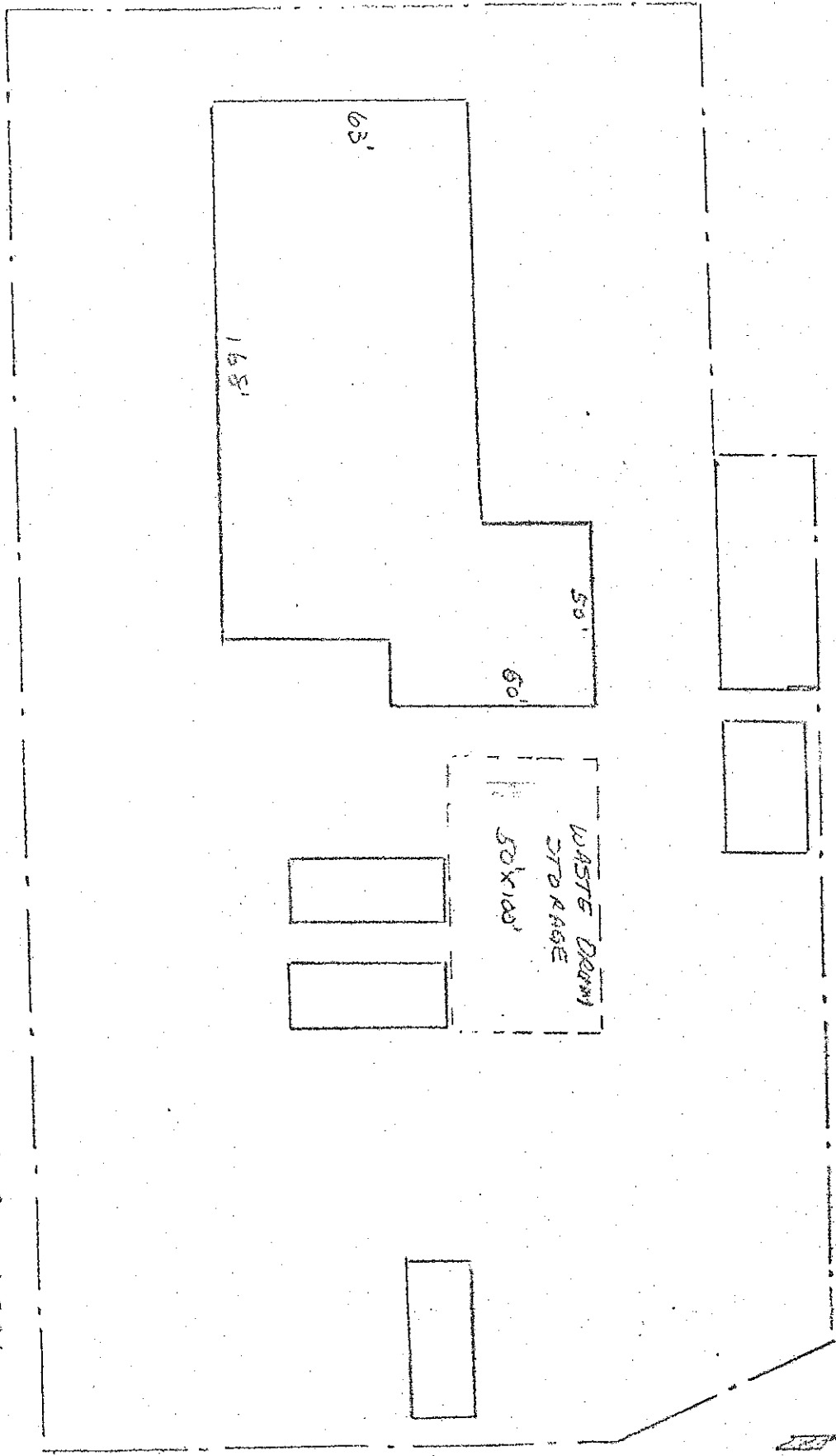
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

 $\forall E$. (print or type)

D. SIGNATURE

C. DATE SIGNED

BORDEN CHEMICAL
PAINTING INC. DIV.
WHITEHOUSE, OHIO



SWMU 4 Former Lead Contaminated Soils Area

The Former Lead Contaminated Soils Area was discovered during the 1988 OEPA complaint investigation, when investigators noted a small area of discolored soil. Samples were taken and the soil was found to contain high levels of lead. OEPA requested that Borden clean up the area. Borden had 272 yds.³ of lead contaminated soil excavated to a depth of 1 foot and continued in an outward radius until lead levels were less than 5 ppm. All of the excavated soils were disposed of off-site. A natural 5 foot clay layer underlies the area 12 feet bgs and is of low permeability. The clay forms a low permeability layer of protection against possible contaminant migration into the deep aquifer. In order to receive a No Further Action designation from the state for this SWMU, it is necessary to perform a limited subsurface sampling event of the subsurface soils and the shallow groundwater. Samples would be taken in strategic areas at the site in order for overlapping to occur with other areas of the site that will need to be sampled as well.

AOC 1 Former Underground Fuel Tank Area

Two underground storage tanks, 1,000 and 6,000 gallons, were used for fuel oil storage in this area. In 1991, these tanks were removed and were found to have several small holes. The surrounding soils were found to have high levels of TPH. Thirty (30) yds.³ were excavated and disposed of off-site. The soil was excavated until all of the surrounding soils were at a TPH level of 20 ppm or less. With respect to the underlying clay layer, contaminant migration to the deep aquifer is unlikely. In order to receive a No Further Action designation from the state for this AOC, it is necessary to perform a limited subsurface sampling event of the subsurface soils and the shallow groundwater. Samples would be taken in strategic areas at the site in order for overlapping to occur with other areas of the site that will need to be sampled as well.

Metal Storage Sheds

The OEPA conducted a site visit in 1993, and found some unlabeled drums containing liquid in these two areas. OEPA indicated that unless the contents of the containers can be proven to be non-hazardous, confirmatory subsurface testing will need to be completed in order for the area to receive a No Further Action Status. Samples would be taken in strategic areas at the site in order for overlapping to occur with other areas of the site that will need to be sampled as well.



Conclusions

We have reviewed all of the information on the site to date. Based on this information, we have determined that:

1. EPA has closed SWMU 1 and therefore a No Further Action determination should be granted by the OEPA.
2. A 1992 PA/VSI for SWMU 2 determined that potential sources have been removed, therefore a No Further Action determination should be granted by the OEPA.
3. Strategic subsurface samples need to be taken in order to confirm that contaminant migration into the soils and shallow groundwater has not occurred at SWMUs 3 and 4, AOC 1 and at the location of the metal storage sheds.

Thank you for taking time to review the attached information and to consider this request to be the lead agency for this case. We look forward to working with the OEPA to bring this site to closure. We would be happy to meet with you to discuss the site in greater detail. If you have any questions please feel free to contact me at (303)771-9200 x 107. We look forward to your response.

Sincerely,



Michael Bertrand



cc: George Hamper Region V EPA w/attachments
Gerald Phillips Region V EPA w/attachments



DOCUMENTATION OF ENVIRONMENTAL INDICATOR DETERMINATION

Interim Final 2/5/99

RCRA Corrective Action
Environmental Indicator (EI) RCRIS code (CA725)

Current Human Exposures Under Control

Facility Name: Borden Chemical (Printing Ink)
Facility Address: no longer in existence
Facility EPA ID #: 0HDD005043740

1. Has all available relevant/significant information on known and reasonably suspected releases to soil, groundwater, surface water/sediments, and air, subject to RCRA Corrective Action (e.g., from Solid Waste Management Units (SWMU), Regulated Units (RU), and Areas of Concern (AOC)), been **considered** in this EI determination?

Y If yes - check here and continue with #2 below.
_____ If no - re-evaluate existing data, or
_____ if data are not available skip to #6 and enter "IN" (more information needed) status code.

BACKGROUND

Definition of Environmental Indicators (for the RCRA Corrective Action)

Environmental Indicators (EI) are measures being used by the RCRA Corrective Action program to go beyond programmatic activity measures (e.g., reports received and approved, etc.) to track changes in the quality of the environment. The two EI developed to-date indicate the quality of the environment in relation to current human exposures to contamination and the migration of contaminated groundwater. An EI for non-human (ecological) receptors is intended to be developed in the future.

Definition of "Current Human Exposures Under Control" EI

A positive "Current Human Exposures Under Control" EI determination ("YE" status code) indicates that there are no "unacceptable" human exposures to "contamination" (i.e., contaminants in concentrations in excess of appropriate risk-based levels) that can be reasonably expected under current land- and groundwater-use conditions (for all "contamination" subject to RCRA corrective action at or from the identified facility (i.e., site-wide)).

Relationship of EI to Final Remedies

While Final remedies remain the long-term objective of the RCRA Corrective Action program the EI are near-term objectives which are currently being used as Program measures for the Government Performance and Results Act of 1993, GPRA). The "Current Human Exposures Under Control" EI are for reasonably expected human exposures under current land- and groundwater-use conditions ONLY, and do not consider potential future land- or groundwater-use conditions or ecological receptors. The RCRA Corrective Action program's overall mission to protect human health and the environment requires that Final remedies address these issues (i.e., potential future human exposure scenarios, future land and groundwater uses, and ecological receptors).

Duration / Applicability of EI Determinations

EI Determinations status codes should remain in RCRIS national database ONLY as long as they remain true (i.e., RCRIS status codes must be changed when the regulatory authorities become aware of contrary information).

Current Human Exposures Under Control
Environmental Indicator (EI) RCRIS code (CA725)

Page 2

2. Are groundwater, soil, surface water, sediments, or air **media** known or reasonably suspected to be “contaminated”¹ above appropriately protective risk-based “levels” (applicable promulgated standards, as well as other appropriate standards, guidelines, guidance, or criteria) from releases subject to RCRA Corrective Action (from SWMUs, RUs or AOCs)?

	<u>Yes</u>	<u>No</u>	<u>?</u>	<u>Rationale / Key Contaminants</u>
Groundwater		N		
Air (indoors) ²		N		
Surface Soil (e.g., <2 ft)		N		
Surface Water		N		
Sediment		N		
Subsurf. Soil (e.g., >2 ft)	Y			1992 PA/VSI report
Air (outdoors)		N		

—— If no (for all media) - skip to #6, and enter “YE,” status code after providing or citing appropriate “levels,” and referencing sufficient supporting documentation demonstrating that these “levels” are not exceeded.

Y If yes (for any media) - continue after identifying key contaminants in each “contaminated” medium, citing appropriate “levels” (or provide an explanation for the determination that the medium could pose an unacceptable risk), and referencing supporting documentation.

—— If unknown (for any media) - skip to #6 and enter “TN” status code.

Rationale and Reference(s):

Presently a private residence exists on the property per Allen Debus’ May 16, 2002 memo to Hak Cho. This property is no longer commercially zoned and was decommissioned in the late 1990s following 1999 sampling conducted to certify closure with the OEPA. A 2/15/00 letter from a site that sampled & remediated the facility indicates ‘no remaining environmental issues.’ The 1992 PA/VSI report indicates contaminated soil was excavated & removed.

3. Are there **complete pathways** between “contamination” and human receptors such that exposures can be reasonably expected under the current (land- and groundwater-use) conditions?

Summary Exposure Pathway Evaluation Table

Potential **Human Receptors** (Under Current Conditions)

¹ “Contamination” and “contaminated” describes media containing contaminants (in any form, NAPL and/or dissolved, vapors, or solids, that are subject to RCRA) in concentrations in excess of appropriately protective risk-based “levels” (for the media, that identify risks within the acceptable risk range).

² Recent evidence (from the Colorado Dept. of Public Health and Environment, and others) suggest that unacceptable indoor air concentrations are more common in structures above groundwater with volatile contaminants than previously believed. This is a rapidly developing field and reviewers are encouraged to look to the latest guidance for the appropriate methods and scale of demonstration necessary to be reasonably certain that indoor air (in structures located above (and adjacent to) groundwater with volatile contaminants) does not present unacceptable risks.

Current Human Exposures Under Control
Environmental Indicator (EI) RCRIS code (CA725)
Page 3

<u>"Contaminated" Media</u>	Residents	Workers	Day-Care	Construction	Trespassers	Recreation	Food ³
Groundwater	—	—	—	—			—
Air (indoors)	—	—	—				
Soil (surface, e.g., <2 ft)	—	—	—	—	—	—	—
Surface Water	—	—			—	—	—
Sediment	—	—			—	—	—
Soil (subsurface e.g., >2 ft)				N			—
Air (outdoors)	—	—	—	—	—		

Instructions for Summary Exposure Pathway Evaluation Table:

1. Strike-out specific Media including Human Receptors' spaces for Media which are not "contaminated" as identified in #2 above.
2. enter "yes" or "no" for potential "completeness" under each "Contaminated" Media -- Human Receptor combination (Pathway).

Note: In order to focus the evaluation to the most probable combinations some potential "Contaminated" Media - Human Receptor combinations (Pathways) do not have check spaces ("___"). While these combinations may not be probable in most situations they may be possible in some settings and should be added as necessary.

 N If no (pathways are not complete for any contaminated media-receptor combination) - skip to #6, and enter "YE" status code, after explaining and/or referencing condition(s) in-place, whether natural or man-made, preventing a complete exposure pathway from each contaminated medium (e.g., use optional Pathway Evaluation Work Sheet to analyze major pathways).

_____ If yes (pathways are complete for any "Contaminated" Media - Human Receptor combination) - continue after providing supporting explanation.

_____ If unknown (for any "Contaminated" Media - Human Receptor combination) - skip to #6 and enter "IN" status code.

Rationale and Reference(s):

Property is privately owned & chances for major subsurface construction remain unlikely.

4. Can the **exposures** from any of the complete pathways identified in #3 be reasonably expected to be "**significant**"⁴ (i.e., potentially "unacceptable" because exposures can be reasonably expected to be: 1)

³ Indirect Pathway/Receptor (e.g., vegetables, fruits, crops, meat and dairy products, fish, shellfish, etc.)

⁴ If there is any question on whether the identified exposures are "significant" (i.e., potentially "unacceptable") consult a human health Risk Assessment specialist with appropriate education, training and experience.

Current Human Exposures Under Control
Environmental Indicator (EI) RCRIS code (CA725)
Page 4

greater in magnitude (intensity, frequency and/or duration) than assumed in the derivation of the acceptable "levels" (used to identify the "contamination"); or 2) the combination of exposure magnitude (perhaps even though low) and contaminant concentrations (which may be substantially above the acceptable "levels") could result in greater than acceptable risks)?

- _____ If no (exposures can not be reasonably expected to be significant (i.e., potentially "unacceptable") for any complete exposure pathway) - skip to #6 and enter "YE" status code after explaining and/or referencing documentation justifying why the exposures (from each of the complete pathways) to "contamination" (identified in #3) are not expected to be "significant."

- _____ If yes (exposures could be reasonably expected to be "significant" (i.e., potentially "unacceptable") for any complete exposure pathway) - continue after providing a description (of each potentially "unacceptable" exposure pathway) and explaining and/or referencing documentation justifying why the exposures (from each of the remaining complete pathways) to "contamination" (identified in #3) are not expected to be "significant."

- _____ If unknown (for any complete pathway) - skip to #6 and enter "IN" status code

Rationale and Reference(s):

Current Human Exposures Under Control
Environmental Indicator (EI) RCRIS code (CA725)

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5. Can the "significant" exposures (identified in #4) be shown to be within acceptable limits?

- _____ If yes (all "significant" exposures have been shown to be within acceptable limits) - continue and enter "YE" after summarizing and referencing documentation justifying why all "significant" exposures to "contamination" are within acceptable limits (e.g., a site-specific Human Health Risk Assessment).
- _____ If no (there are current exposures that can be reasonably expected to be "unacceptable")- continue and enter "NO" status code after providing a description of each potentially "unacceptable" exposure.
- _____ If unknown (for any potentially "unacceptable" exposure) - continue and enter "IN" status code

Rationale and Reference(s):

Current Human Exposures Under Control
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6. Check the appropriate RCRIS status codes for the Current Human Exposures Under Control EI event code (CA725), and obtain Supervisor (or appropriate Manager) signature and date on the EI determination below (and attach appropriate supporting documentation as well as a map of the facility):

Y YE - Yes, "Current Human Exposures Under Control" has been verified. Based on a review of the information contained in this EI Determination, "Current Human Exposures" are expected to be "Under Control" at the (former) Borden Chemical facility, EPA ID # 0HD 005 043 740 formerly located at 6725 Gilead St. Whitehouse, OH under current and reasonably expected conditions. This determination will be re-evaluated when the Agency/State becomes aware of significant changes at the facility.

____ NO - "Current Human Exposures" are NOT "Under Control."

IN IN - More information is needed to make a determination.

Completed by (signature) _____ Date _____
(print) Allen Debus
(title) Chemist/Project manager August 1, 2002

Supervisor (signature) _____ Date _____
(print) _____
(title) _____
(EPA Region or State) _____

Current Human Exposures Under Control
Environmental Indicator (EI) RCRIS code (CA725)

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Locations where References may be found:

7th Floor Archive at 77 West Jackson Blvd. Chicago, IL

Note:

There wasn't much information available on the former Borden Chemical Printing Ink Division facility, which was situated in Whitehouse, Ohio, and so I supplemented the U.S. EPA's single file of documents through a series of phone calls and informational requests. This note shall document those communications. The PA/VSI was completed on June 17, 1992. Borden's 5-acre facility became inactive in 1985, shortly after its Drum Storage Pad closure was certified-approved by the U.S. EPA (in 1984).

Although Borden had been used as a dairy between the 1930s through 1950s, between 1961 and 1982 it operated as a manufacturing center, producing lead and solvent-based printing inks. A decade ago, authors of the PA/VSI report recommended further action (i.e. groundwater sampling and analysis for VOCs) for the vicinity of an area formerly occupied by underground fuel tanks. Two underground tanks (1,000 gallons & 6,000 gallon capacities) had been removed from the location in 1991. Total Petroleum Hydrocarbons (TPH) contamination was noted, leading to excavation and offsite disposal of petroleum-contaminated (4,000 ppm) soil. Following remediation, residual TPH levels were < 20 ppm.

Borden also managed a former underground tank farm, from which chemical releases (i.e. VOCs) occurred. The 1992 PA/VSI report states *"...significant levels of VOCs were detected in groundwater samples. Nothing has been done to remediate this groundwater contamination. An (8 foot thick) clay layer appears to underlie the area at a depth of about 12 feet preventing downward migration to the primary water-bearing aquifer.... Though no soil samples were taken, subsurface soil is probably contaminated because there is groundwater contamination. Surface soil should be free of contamination because the release occurred underground."*

The PA/VSI also described an area contaminated with lead, from which 272 cubic yards of soils contaminated with up to 110 ppm lead were removed in 1988. Authors of the 1992 PA/VSI report concluded that groundwater should be sampled for metals and VOCs in the vicinity of the lead-contamination zone.

Because the U.S. EPA's file information ended with the 1992 PA/VSI report, it was not possible to decipher what had happened at the facility since 1992 without making a series of phone calls. But, following a chain of telephone calls, I gleaned the following. Admittedly, some of this information is rather 'sketchy.'

In late 1997, OEPA had been notified of the sale of the former Borden facility involving (or possibly sold to) a firm named Cherokee Environmental Risk Mgt., based in Englewood, CO. Cherokee performed additional sampling in 1999 to 'complete a certified closure.' Then, the property was resold, following demolition of onsite building structures (by a firm known as 'ERMC'). Evidently, following the closure-related sampling, a Feb. 15, 2000 Cherokee letter explains how there were, 'no remaining environmental issues.' Repeated phone requests to Cherokee scored no success in obtaining these documents or other information bearing on recent Borden site history. From the OEPA-NW District Office's archives, however, I was able to obtain a copy of a 7/8/98 letter from Cherokee addressed to OEPA. Therein, after summarizing results of the PA/VSI and requesting a 'no further action determination' from OEPA, Cherokee stated that *"Strategic subsurface samples need to be taken in order to confirm that contaminant migration into the soils and shallow groundwater has not occurred...."* A data summary report contained in the PA/VSI report shows that groundwater contaminant levels were less than MCLs in 1986.

Prior to uncovering further details on the chain of events leading to property sales, I contacted the Lucas County Recorder office, from whom I obtained the name of the current property owner for the 6725 Gilead address, which is also the former facility street address as noted on Borden's Part A application. I was informed that this address is now a residential property owned by Daniel J. and Leslie A. White. Given that the former Borden facility is evidently no longer commercially owned or operated, and is now zoned as a family residence, this would be a poor choice for a VCAA. The site no longer meets our definition of commercial facility. Presently, based on my interpretation of available records, there is little reason to suspect that hazardous constituent contamination exists in surface soils above levels of concern to human health.

Contact telephone and e-mail numbers

(name)	<u>Allen Debus</u>
(phone #)	<u>312-886-6186</u>
(e-mail)	<u>debus.allen@epamail.epa.gov</u>

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FINAL NOTE: THE HUMAN EXPOSURES EI IS A QUALITATIVE SCREENING OF EXPOSURES AND THE DETERMINATIONS WITHIN THIS DOCUMENT SHOULD NOT BE USED AS THE SOLE BASIS FOR RESTRICTING THE SCOPE OF MORE DETAILED (E.G., SITE-SPECIFIC) ASSESSMENTS OF RISK.

DOCUMENTATION OF ENVIRONMENTAL INDICATOR DETERMINATION

Interim Final 2/5/99

RCRA Corrective Action
Environmental Indicator (EI) RCRIS code (CA750)

Migration of Contaminated Groundwater Under Control

Facility Name: Borden Chemical (Printing Ink)
Facility Address: no longer in existence
Facility EPA ID #: 0HD005043740

1. Has all available relevant/significant information on known and reasonably suspected releases to the groundwater media, subject to RCRA Corrective Action (e.g., from Solid Waste Management Units (SWMU), Regulated Units (RU), and Areas of Concern (AOC)), been **considered** in this EI determination?

Y If yes - check here and continue with #2 below.
_____ If no - re-evaluate existing data, or
_____ if data are not available skip to #6 and enter "IN" (more information needed) status code.

BACKGROUND

Definition of Environmental Indicators (for the RCRA Corrective Action)

Environmental Indicators (EI) are measures being used by the RCRA Corrective Action program to go beyond programmatic activity measures (e.g., reports received and approved, etc.) to track changes in the quality of the environment. The two EI developed to-date indicate the quality of the environment in relation to current human exposures to contamination and the migration of contaminated groundwater. An EI for non-human (ecological) receptors is intended to be developed in the future.

Definition of "Migration of Contaminated Groundwater Under Control" EI

A positive "Migration of Contaminated Groundwater Under Control" EI determination ("YE" status code) indicates that the migration of "contaminated" groundwater has stabilized, and that monitoring will be conducted to confirm that contaminated groundwater remains within the original "area of contaminated groundwater" (for all groundwater "contamination" subject to RCRA corrective action at or from the identified facility (i.e., site-wide)).

Relationship of EI to Final Remedies

While Final remedies remain the long-term objective of the RCRA Corrective Action program the EI are near-term objectives which are currently being used as Program measures for the Government Performance and Results Act of 1993, GPRA). The "Migration of Contaminated Groundwater Under Control" EI pertains ONLY to the physical migration (i.e., further spread) of contaminated ground water and contaminants within groundwater (e.g., non-aqueous phase liquids or NAPLs). Achieving this EI does not substitute for achieving other stabilization or final remedy requirements and expectations associated with sources of contamination and the need to restore, wherever practicable, contaminated groundwater to be suitable for its designated current and future uses.

Duration / Applicability of EI Determinations

EI Determinations status codes should remain in RCRIS national database ONLY as long as they remain true (i.e., RCRIS status codes must be changed when the regulatory authorities become aware of contrary information).

Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)
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2. Is **groundwater** known or reasonably suspected to be "**contaminated**"¹ above appropriately protective "levels" (i.e., applicable promulgated standards, as well as other appropriate standards, guidelines, guidance, or criteria) from releases subject to RCRA Corrective Action, anywhere at, or from, the facility?

_____ If yes - continue after identifying key contaminants, citing appropriate "levels," and referencing supporting documentation.

 N If no - skip to #8 and enter "YE" status code, after citing appropriate "levels," and referencing supporting documentation to demonstrate that groundwater is not "contaminated."

_____ If unknown - skip to #8 and enter "IN" status code.

Rationale and Reference(s):

Data (Table 3) in the 1992 PA/VSI report indicates that VOCs and lead did not exceed levels of concern, (MCLs). Evidently in 1998, Cherokee Environmental Risk Mgt. sampled the property in order to certify closure. By 2000 Cherokee had established there were no remaining environmental issues. Also see CA-725 form for this facility (see note in 'Location where references may be found.' p. 7).

¹ "Contamination" and "contaminated" describes media containing contaminants (in any form, NAPL and/or dissolved, vapors, or solids, that are subject to RCRA) in concentrations in excess of appropriate "levels" (appropriate for the protection of the groundwater resource and its beneficial uses).

Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)

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3. Has the **migration** of contaminated groundwater **stabilized** (such that contaminated groundwater is expected to remain within "existing area of contaminated groundwater"² as defined by the monitoring locations designated at the time of this determination)?

- _____ If yes - continue, after presenting or referencing the physical evidence (e.g., groundwater sampling/measurement/migration barrier data) and rationale why contaminated groundwater is expected to remain within the (horizontal or vertical) dimensions of the "existing area of groundwater contamination"².
- _____ If no (contaminated groundwater is observed or expected to migrate beyond the designated locations defining the "existing area of groundwater contamination"²) - skip to #8 and enter "NO" status code, after providing an explanation.
- _____ If unknown - skip to #8 and enter "IN" status code.

Rationale and Reference(s):

² "existing area of contaminated groundwater" is an area (with horizontal and vertical dimensions) that has been verifiably demonstrated to contain all relevant groundwater contamination for this determination, and is defined by designated (monitoring) locations proximate to the outer perimeter of "contamination" that can and will be sampled/tested in the future to physically verify that all "contaminated" groundwater remains within this area, and that the further migration of "contaminated" groundwater is not occurring. Reasonable allowances in the proximity of the monitoring locations are permissible to incorporate formal remedy decisions (i.e., including public participation) allowing a limited area for natural attenuation.

Migration of Contaminated Groundwater Under Control
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4. Does "contaminated" groundwater **discharge** into **surface water** bodies?

_____ If yes - continue after identifying potentially affected surface water bodies.

_____ If no - skip to #7 (and enter a "YE" status code in #8, if #7 = yes) after providing an explanation and/or referencing documentation supporting that groundwater "contamination" does not enter surface water bodies.

_____ If unknown - skip to #8 and enter "IN" status code.

Rationale and Reference(s):

Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)

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5. Is the **discharge** of “contaminated” groundwater into surface water likely to be “**insignificant**” (i.e., the maximum concentration³ of each contaminant discharging into surface water is less than 10 times their appropriate groundwater “level,” and there are no other conditions (e.g., the nature, and number, of discharging contaminants, or environmental setting), which significantly increase the potential for unacceptable impacts to surface water, sediments, or eco-systems at these concentrations)?

_____ If yes - skip to #7 (and enter “YE” status code in #8 if #7 = yes), after documenting: 1) the maximum known or reasonably suspected concentration³ of key contaminants discharged above their groundwater “level,” the value of the appropriate “level(s),” and if there is evidence that the concentrations are increasing; and 2) provide a statement of professional judgement/explanation (or reference documentation) supporting that the discharge of groundwater contaminants into the surface water is not anticipated to have unacceptable impacts to the receiving surface water, sediments, or eco-system.

_____ If no - (the discharge of “contaminated” groundwater into surface water is potentially significant) - continue after documenting: 1) the maximum known or reasonably suspected concentration³ of each contaminant discharged above its groundwater “level,” the value of the appropriate “level(s),” and if there is evidence that the concentrations are increasing; and 2) for any contaminants discharging into surface water in concentrations³ greater than 100 times their appropriate groundwater “levels,” the estimated total amount (mass in kg/yr) of each of these contaminants that are being discharged (loaded) into the surface water body (at the time of the determination), and identify if there is evidence that the amount of discharging contaminants is increasing.

_____ If unknown - enter “IN” status code in #8.

Rationale and Reference(s):

6. Can the **discharge** of “contaminated” groundwater into surface water be shown to be “**currently acceptable**” (i.e., not cause impacts to surface water, sediments or eco-systems that should not be allowed

³ As measured in groundwater prior to entry to the groundwater-surface water/sediment interaction (e.g., hyporheic) zone.

**Migration of Contaminated Groundwater Under Control
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to continue until a final remedy decision can be made and implemented⁴)?

_____ If yes - continue after either: 1) identifying the Final Remedy decision incorporating these conditions, or other site-specific criteria (developed for the protection of the site's surface water, sediments, and eco-systems), and referencing supporting documentation demonstrating that these criteria are not exceeded by the discharging groundwater; OR 2) providing or referencing an interim-assessment,⁵ appropriate to the potential for impact, that shows the discharge of groundwater contaminants into the surface water is (in the opinion of a trained specialists, including ecologist) adequately protective of receiving surface water, sediments, and eco-systems, until such time when a full assessment and final remedy decision can be made. Factors which should be considered in the interim-assessment (where appropriate to help identify the impact associated with discharging groundwater) include: surface water body size, flow, use/classification/habitats and contaminant loading limits, other sources of surface water/sediment contamination, surface water and sediment sample results and comparisons to available and appropriate surface water and sediment "levels," as well as any other factors, such as effects on ecological receptors (e.g., via bio-assays/benthic surveys or site-specific ecological Risk Assessments), that the overseeing regulatory agency would deem appropriate for making the EI determination.

_____ If no - (the discharge of "contaminated" groundwater can not be shown to be "**currently acceptable**") - skip to #8 and enter "NO" status code, after documenting the currently unacceptable impacts to the surface water body, sediments, and/or eco-systems.

_____ If unknown - skip to 8 and enter "IN" status code.

Rationale and Reference(s):

⁴ Note, because areas of inflowing groundwater can be critical habitats (e.g., nurseries or thermal refugia) for many species, appropriate specialist (e.g., ecologist) should be included in management decisions that could eliminate these areas by significantly altering or reversing groundwater flow pathways near surface water bodies.

⁵ The understanding of the impacts of contaminated groundwater discharges into surface water bodies is a rapidly developing field and reviewers are encouraged to look to the latest guidance for the appropriate methods and scale of demonstration to be reasonably certain that discharges are not causing currently unacceptable impacts to the surface waters, sediments or eco-systems.

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7. Will groundwater **monitoring** / measurement data (and surface water/sediment/ecological data, as necessary) be collected in the future to verify that contaminated groundwater has remained within the horizontal (or vertical, as necessary) dimensions of the "existing area of contaminated groundwater?"

_____ If yes - continue after providing or citing documentation for planned activities or future sampling/measurement events. Specifically identify the well/measurement locations which will be tested in the future to verify the expectation (identified in #3) that groundwater contamination will not be migrating horizontally (or vertically, as necessary) beyond the "existing area of groundwater contamination."

_____ If no - enter "NO" status code in #8.

_____ If unknown - enter "IN" status code in #8.

Rationale and Reference(s):

8. Check the appropriate RCRIS status codes for the Migration of Contaminated Groundwater Under Control

DOCUMENTATION OF ENVIRONMENTAL INDICATOR DETERMINATION

Interim Final 2/5/99

RCRA Corrective Action Environmental Indicator (EI) RCRIS code (CA750)

Migration of Contaminated Groundwater Under Control

Facility Name:	Borden Chemical (Printing Ink)
Facility Address:	no longer in existence
Facility EPA ID #:	0HD005043740

1. Has **all** available relevant/significant information on known and reasonably suspected releases to the groundwater media, subject to RCRA Corrective Action (e.g., from Solid Waste Management Units (SWMU), Regulated Units (RU), and Areas of Concern (AOC)), been **considered** in this EI determination?

Y If yes - check here and continue with #2 below.
— If no - re-evaluate existing data, or
— if data are not available skip to #6 and enter "IN" (more information needed) status code.
—

BACKGROUND

Definition of Environmental Indicators (for the RCRA Corrective Action)

Environmental Indicators (EI) are measures being used by the RCRA Corrective Action program to go beyond programmatic activity measures (e.g., reports received and approved, etc.) to track changes in the quality of the environment. The two EI developed to-date indicate the quality of the environment in relation to current human exposures to contamination and the migration of contaminated groundwater. An EI for non-human (ecological) receptors is intended to be developed in the future.

Definition of "Migration of Contaminated Groundwater Under Control" EI

A positive "Migration of Contaminated Groundwater Under Control" EI determination ("YE" status code) indicates that the migration of "contaminated" groundwater has stabilized, and that monitoring will be conducted to confirm that contaminated groundwater remains within the original "area of contaminated groundwater" (for all groundwater "contamination" subject to RCRA corrective action at or from the identified facility (i.e., site-wide)).

Relationship of EI to Final Remedies

While Final remedies remain the long-term objective of the RCRA Corrective Action program the EI are near-term objectives which are currently being used as Program measures for the Government Performance and Results Act of 1993, GPRA). The "Migration of Contaminated Groundwater Under Control" EI pertains **ONLY** to the physical migration (i.e., further spread) of contaminated ground water and contaminants within groundwater (e.g., non-aqueous phase liquids or NAPLs). Achieving this EI does not substitute for achieving other stabilization or final remedy requirements and expectations associated with sources of contamination and the need to restore, wherever practicable, contaminated groundwater to be suitable for its designated current and future uses.

Duration / Applicability of EI Determinations

EI Determinations status codes should remain in RCRIS national database **ONLY** as long as they remain true (i.e., RCRIS status codes must be changed when the regulatory authorities become aware of contrary information).

**Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)**

Page 2

2. Is **groundwater** known or reasonably suspected to be "**contaminated**"¹ above appropriately protective "levels" (i.e., applicable promulgated standards, as well as other appropriate standards, guidelines, guidance, or criteria) from releases subject to RCRA Corrective Action, anywhere at, or from, the facility?

_____ If yes - continue after identifying key contaminants, citing appropriate "levels," and referencing supporting documentation.

N If no - skip to #8 and enter "YE" status code, after citing appropriate "levels," and referencing supporting documentation to demonstrate that groundwater is not "contaminated."

_____ If unknown - skip to #8 and enter "IN" status code.

Rationale and Reference(s): 1992 PA/VSI Report for Borden Chemicals prepared for USEPA by PRC. (Table 3).

¹ "Contamination" and "contaminated" describes media containing contaminants (in any form, NAPL and/or dissolved, vapors, or solids, that are subject to RCRA) in concentrations in excess of appropriate "levels" (appropriate for the protection of the groundwater resource and its beneficial uses).

**Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)**

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Data (Table 3) in the 1992 PA/VSI report indicates that in 1986 several VOCs did exceed levels of concern. Evidently in 1998, Cherokee Environmental Risk Mgt. sampled the property in order to certify closure. By 2000 Cherokee had established there were no remaining environmental issues. During removal action in 1986, four borings were sampled from which boring # 3 was found to have several elevated VOCs, of which only two parameters exceeded MCL values (i.e. – TCE and PCE) at a 17 foot depth. Air stripping remediation attempts were made over the next two months to further reduce contaminants. In 1988, there were no VOCs detections in the 160 foot depth dolomite aquifer which is used locally as a drinking water source. A ‘very tight layer of gray clay’ underlies the area of the entire former site from 12 feet to 17 feet, although the clay layer probably extends to 20 feet below the ground surface. Dolomite bedrock lies immediately under the 5 to 8 foot clay layer. While groundwater in which shallow level contamination was detected 20 years ago is not considered a potable source, it is also most unlikely to represent a vertically migrating plume. While there is no current or recent groundwater data characterizing the contamination, its horizontal rate of migration is most likely negligible, especially since any contaminants remaining following site remediation efforts may have biodegraded during the past 20 years.

1986 Contaminant concentrations noted/(Region 9 PRG Value - 2002): Benzene – 4.2 ug/L/(0.34 ug/L); TCE – 13 ug/L/(0.28 ug/L); PCE – 64 ug/L/(0.66 ug/L); Toluene – 330 ug/L/(72 ug/L); Ethylbenzene – 6.1 ug/L/(2.9 ug/L); m-dichlorobenzene – 9.7 ug/L/(5.5 ug/L); o + p – dichlorobenzene 36 ug/L/(370, 0.5 ug/L, for o & p isomers, respectively)

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Environmental Indicator (EI) RCRIS code (CA750)
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Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)

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3. Has the **migration** of contaminated groundwater **stabilized** (such that contaminated groundwater is expected to remain within "existing area of contaminated groundwater"² as defined by the monitoring locations designated at the time of this determination)?

_____ If yes - continue, after presenting or referencing the physical evidence (e.g., groundwater sampling/measurement/migration barrier data) and rationale why contaminated groundwater is expected to remain within the (horizontal or vertical) dimensions of the "existing area of groundwater contamination"².

_____ If no (contaminated groundwater is observed or expected to migrate beyond the designated locations defining the "existing area of groundwater contamination"²) - skip to #8 and enter "NO" status code, after providing an explanation.

_____ If unknown - skip to #8 and enter "IN" status code.

_____ Rationale and Reference(s):

² "existing area of contaminated groundwater" is an area (with horizontal and vertical dimensions) that has been verifiably demonstrated to contain all relevant groundwater contamination for this determination, and is defined by designated (monitoring) locations proximate to the outer perimeter of "contamination" that can and will be sampled/tested in the future to physically verify that all "contaminated" groundwater remains within this area, and that the further migration of "contaminated" groundwater is not occurring. Reasonable allowances in the proximity of the monitoring locations are permissible to incorporate formal remedy decisions (i.e., including public participation) allowing a limited area for natural attenuation.

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Environmental Indicator (EI) RCRIS code (CA750)
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Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)

Page 7

4. Does "contaminated" groundwater **discharge** into **surface water** bodies?

_____ If yes - continue after identifying potentially affected surface water bodies.

_____ If no - skip to #7 (and enter a "YE" status code in #8, if #7 = yes) after providing an explanation and/or referencing documentation supporting that groundwater "contamination" does not enter surface water bodies.

_____ If unknown - skip to #8 and enter "IN" status code.

_____ Rationale and Reference(s):

Migration of Contaminated Groundwater Under Control
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5. Is the **discharge** of "contaminated" groundwater into surface water likely to be "**insignificant**" (i.e., the maximum concentration³ of each contaminant discharging into surface water is less than 10 times their appropriate groundwater "level," and there are no other conditions (e.g., the nature, and number, of discharging contaminants, or environmental setting), which significantly increase the potential for unacceptable impacts to surface water, sediments, or eco-systems at these concentrations)?

_____ If yes - skip to #7 (and enter "YE" status code in #8 if #7 = yes), after documenting: 1) the maximum known or reasonably suspected concentration³ of key contaminants discharged above their groundwater "level," the value of the appropriate "level(s)," and if there is evidence that the concentrations are increasing; and 2) provide a statement of professional judgement/explanation (or reference documentation) supporting that the discharge of groundwater contaminants into the surface water is not anticipated to have unacceptable impacts to the receiving surface water, sediments, or eco-system.

_____ If no - (the discharge of "contaminated" groundwater into surface water is potentially significant) - continue after documenting: 1) the maximum known or reasonably suspected concentration³ of each contaminant discharged above its groundwater "level," the value of the appropriate "level(s)," and if there is evidence that the concentrations are increasing; and 2) for any contaminants discharging into surface water in concentrations³ greater than 100 times their appropriate groundwater "levels," the estimated total amount (mass in kg/yr) of each of these contaminants that are being discharged (loaded) into the surface water body (at the time of the determination), and identify if there is evidence that the amount of discharging contaminants is increasing.

_____ If unknown - enter "IN" status code in #8.

_____ Rationale and Reference(s):

³ As measured in groundwater prior to entry to the groundwater-surface water/sediment interaction (e.g., hyporheic) zone.

Migration of Contaminated Groundwater Under Control
Environmental Indicator (EI) RCRIS code (CA750)

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6. Can the **discharge** of “contaminated” groundwater into surface water be shown to be “**currently acceptable**” (i.e., not cause impacts to surface water, sediments or eco-systems that should not be allowed to continue until a final remedy decision can be made and implemented⁴)?

_____ If yes - continue after either: 1) identifying the Final Remedy decision incorporating these conditions, or other site-specific criteria (developed for the protection of the site’s surface water, sediments, and eco-systems), and referencing supporting documentation demonstrating that these criteria are not exceeded by the discharging groundwater; OR 2) providing or referencing an interim-assessment,⁵ appropriate to the potential for impact, that shows the discharge of groundwater contaminants into the surface water is (in the opinion of a trained specialists, including ecologist) adequately protective of receiving surface water, sediments, and eco-systems, until such time when a full assessment and final remedy decision can be made. Factors which should be considered in the interim-assessment (where appropriate to help identify the impact associated with discharging groundwater) include: surface water body size, flow, use/classification/habitats and contaminant loading limits, other sources of surface water/sediment contamination, surface water and sediment sample results and comparisons to available and appropriate surface water and sediment “levels,” as well as any other factors, such as effects on ecological receptors (e.g., via bio-assays/benthic surveys or site-specific ecological Risk Assessments), that the overseeing regulatory agency would deem appropriate for making the EI determination.

_____ If no - (the discharge of “contaminated” groundwater can not be shown to be “**currently acceptable**”) - skip to #8 and enter “NO” status code, after documenting the currently unacceptable impacts to the surface water body, sediments, and/or eco-systems.

_____ If unknown - skip to 8 and enter “IN” status code.

_____ Rationale and Reference(s):

⁴ Note, because areas of inflowing groundwater can be critical habitats (e.g., nurseries or thermal refugia) for many species, appropriate specialist (e.g., ecologist) should be included in management decisions that could eliminate these areas by significantly altering or reversing groundwater flow pathways near surface water bodies.

⁵ The understanding of the impacts of contaminated groundwater discharges into surface water bodies is a rapidly developing field and reviewers are encouraged to look to the latest guidance for the appropriate methods and scale of demonstration to be reasonably certain that discharges are not causing currently unacceptable impacts to the surface waters, sediments or eco-systems.

**Migration of Contaminated Groundwater Under Control
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7. Will groundwater **monitoring** / measurement data (and surface water/sediment/ecological data, as necessary) be collected in the future to verify that contaminated groundwater has remained within the horizontal (or vertical, as necessary) dimensions of the "existing area of contaminated groundwater?"
- _____ If yes - continue after providing or citing documentation for planned activities or future sampling/measurement events. Specifically identify the well/measurement locations which will be tested in the future to verify the expectation (identified in #3) that groundwater contamination will not be migrating horizontally (or vertically, as necessary) beyond the "existing area of groundwater contamination."
- _____ If no - enter "NO" status code in #8.
- _____ If unknown - enter "IN" status code in #8.

Rationale and Reference(s):

8. Check the appropriate RCRIS status codes for the Migration of Contaminated Groundwater Under Control EI (event code CA750), and obtain Supervisor (or

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appropriate Manager) signature and date on the EI determination below (attach appropriate supporting documentation as well as a map of the facility).

Y

YE - Yes, "Migration of Contaminated Groundwater Under Control" has been verified. Based on a review of the information contained in this EI determination, it has been determined that the "Migration of Contaminated Groundwater" is "Under Control" at the ___Former Borden chemicals facility , EPA ID # OHD005043740, formerly located at Whitehouse, OH. Specifically, this determination indicates that the migration of "contaminated" groundwater is under control, and that monitoring will be conducted to confirm that contaminated groundwater remains within the "existing area of contaminated groundwater" This determination will be re-evaluated when the Agency becomes aware of significant changes at the facility.

NO - Unacceptable migration of contaminated groundwater is observed

or expected.

IN - More information is needed to make a determination.

Completed by	(signature)		Date	
	(print)	Allen Debus		May 22, 2006
	(title)	Chemist/Project Manager		

Supervisor	(signature)		Date	
	(print)			
	(title)			
	(EPA Region or State)			

Locations where References may be found:
7 th floor archive room at 77 West Jackson Blvd., Chicago.

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Locations where References may be found:

Contact telephone and e-mail numbers

(name)	Allen A. Debus
(phone #)	(312) 886-6186
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DOCUMENTATION OF ENVIRONMENTAL INDICATOR DETERMINATION

Interim Final 2/5/99

**RCRA Corrective Action
Environmental Indicator (EI) RCRIS code (CA725)**

Current Human Exposures Under Control

Facility Name: Borden Chemical (Printing Ink)
Facility Address: (Whitehouse, OH), no longer in existence; 6725 Gilead St.
Facility EPA ID #: 0HDD005043740

1. Has **all** available relevant/significant information on known and reasonably suspected releases to soil, groundwater, surface water/sediments, and air, subject to RCRA Corrective Action (e.g., from Solid Waste Management Units (SWMU), Regulated Units (RU), and Areas of Concern (AOC)), been **considered** in this EI determination?

Y If yes - check here and continue with #2 below.
_____ If no - re-evaluate existing data, or
_____ if data are not available skip to #6 and enter "IN" (more information needed) status code.

BACKGROUND

Definition of Environmental Indicators (for the RCRA Corrective Action)

Environmental Indicators (EI) are measures being used by the RCRA Corrective Action program to go beyond programmatic activity measures (e.g., reports received and approved, etc.) to track changes in the quality of the environment. The two EI developed to-date indicate the quality of the environment in relation to current human exposures to contamination and the migration of contaminated groundwater. An EI for non-human (ecological) receptors is intended to be developed in the future.

Definition of "Current Human Exposures Under Control" EI

A positive "Current Human Exposures Under Control" EI determination ("YE" status code) indicates that there are no "unacceptable" human exposures to "contamination" (i.e., contaminants in concentrations in excess of appropriate risk-based levels) that can be reasonably expected under current land- and groundwater-use conditions (for all "contamination" subject to RCRA corrective action at or from the identified facility (i.e., site-wide)).

Relationship of EI to Final Remedies

While Final remedies remain the long-term objective of the RCRA Corrective Action program the EI are near-term objectives which are currently being used as Program measures for the Government Performance and Results Act of 1993, GPRA). The "Current Human Exposures Under Control" EI are for reasonably expected human exposures under current land- and groundwater-use conditions ONLY, and do not consider potential future land- or groundwater-use conditions or ecological receptors. The RCRA Corrective Action program's overall mission to protect human health and the environment requires that Final remedies address these issues (i.e., potential future human exposure scenarios, future land and groundwater uses, and ecological receptors).

Duration / Applicability of EI Determinations

EI Determinations status codes should remain in RCRIS national database ONLY as long as they remain true (i.e., RCRIS status codes must be changed when the regulatory authorities become aware of contrary information).

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2. Are groundwater, soil, surface water, sediments, or air **media** known or reasonably suspected to be **"contaminated"**¹ above appropriately protective risk-based "levels" (applicable promulgated standards, as well as other appropriate standards, guidelines, guidance, or criteria) from releases subject to RCRA Corrective Action (from SWMUs, RUs or AOCs)?

	<u>Yes</u>	<u>No</u>	<u>?</u>	<u>Rationale / Key Contaminants</u>
Groundwater		N		
Air (indoors) ²		N		
Surface Soil (e.g., <2 ft)		N		
Surface Water		N		
Sediment		N		
Subsurf. Soil (e.g., >2 ft)	Y			1992 PA/VSI report
Air (outdoors)		N		

_____ If no (for all media) - skip to #6, and enter "YE," status code after providing or citing appropriate "levels," and referencing sufficient supporting documentation demonstrating that these "levels" are not exceeded.

Y If yes (for any media) - continue after identifying key contaminants in each "contaminated" medium, citing appropriate "levels" (or provide an explanation for the determination that the medium could pose an unacceptable risk), and referencing supporting documentation.

_____ If unknown (for any media) - skip to #6 and enter "IN" status code.

Rationale and Reference(s):

Presently 2 private residences and a Dollar General store situated on a paved lot exist on the former property boundary. Two parcels of this property are no longer commercially zoned. The abandoned Borden site was decommissioned in the late 1990s following 1999 sampling conducted to certify closure with the OEPA. A 2/15/00 letter from Cherokee Environmental that sampled & remediated the facility indicated 'no remaining environmental issues.' The 1992 PA/VSI report indicates contaminated soil was excavated & removed. Also see note following Question no.6.

3. Are there **complete pathways** between "contamination" and human receptors such that exposures can be reasonably expected under the current (land- and groundwater-use) conditions?

Summary Exposure Pathway Evaluation Table

¹ "Contamination" and "contaminated" describes media containing contaminants (in any form, NAPL and/or dissolved, vapors, or solids, that are subject to RCRA) in concentrations in excess of appropriately protective risk-based "levels" (for the media, that identify risks within the acceptable risk range).

² Recent evidence (from the Colorado Dept. of Public Health and Environment, and others) suggest that unacceptable indoor air concentrations are more common in structures above groundwater with volatile contaminants than previously believed. This is a rapidly developing field and reviewers are encouraged to look to the latest guidance for the appropriate methods and scale of demonstration necessary to be reasonably certain that indoor air (in structures located above (and adjacent to) groundwater with volatile contaminants) does not present unacceptable risks.

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Potential Human Receptors (Under Current Conditions)

<u>"Contaminated" Media</u>	Residents	Workers	Day-Care	Construction	Trespassers	Recreation	Food ³
Groundwater	___N___	N___	N___	N___			N___
Air (indoors)	N___	N___	N___				
Soil (surface, e.g., <2 ft)	N___	N___	N___	N___	N___	N___	N___
Surface Water	N___	N___			N___	N___	N___
Sediment	N___	N___			N___	N___	N___
Soil (subsurface e.g., >2 ft)				N___			N___
Air (outdoors)	N___	N___	N___	N___	N___		

Instructions for Summary Exposure Pathway Evaluation Table:

1. Strike-out specific Media including Human Receptors' spaces for Media which are not "contaminated" as identified in #2 above.
2. enter "yes" or "no" for potential "completeness" under each "Contaminated" Media -- Human Receptor combination (Pathway).

Note: In order to focus the evaluation to the most probable combinations some potential "Contaminated" Media - Human Receptor combinations (Pathways) do not have check spaces ("___"). While these combinations may not be probable in most situations they may be possible in some settings and should be added as necessary.

- ___N___ If no (pathways are not complete for any contaminated media-receptor combination) - skip to #6, and enter "YE" status code, after explaining and/or referencing condition(s) in-place, whether natural or man-made, preventing a complete exposure pathway from each contaminated medium (e.g., use optional Pathway Evaluation Work Sheet to analyze major pathways).
- _____ If yes (pathways are complete for any "Contaminated" Media - Human Receptor combination) - continue after providing supporting explanation.
- _____ If unknown (for any "Contaminated" Media - Human Receptor combination) - skip to #6 and enter "IN" status code.

Rationale and Reference(s):

Property is privately owned & chances for major subsurface construction remain unlikely.

4. Can the **exposures** from any of the complete pathways identified in #3 be reasonably expected to be "**significant**"⁴ (i.e., potentially "unacceptable" because exposures can be reasonably expected to be: 1)

³ Indirect Pathway/Receptor (e.g., vegetables, fruits, crops, meat and dairy products, fish, shellfish, etc.)

⁴ If there is any question on whether the identified exposures are "significant" (i.e., potentially "unacceptable") consult a human health Risk Assessment specialist with appropriate education, training and

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greater in magnitude (intensity, frequency and/or duration) than assumed in the derivation of the acceptable "levels" (used to identify the "contamination"); or 2) the combination of exposure magnitude (perhaps even though low) and contaminant concentrations (which may be substantially above the acceptable "levels") could result in greater than acceptable risks)?

- _____ If no (exposures can not be reasonably expected to be significant (i.e., potentially "unacceptable") for any complete exposure pathway) - skip to #6 and enter "YE" status code after explaining and/or referencing documentation justifying why the exposures (from each of the complete pathways) to "contamination" (identified in #3) are not expected to be "significant."

- _____ If yes (exposures could be reasonably expected to be "significant" (i.e., potentially "unacceptable") for any complete exposure pathway) - continue after providing a description (of each potentially "unacceptable" exposure pathway) and explaining and/or referencing documentation justifying why the exposures (from each of the remaining complete pathways) to "contamination" (identified in #3) are not expected to be "significant."

- _____ If unknown (for any complete pathway) - skip to #6 and enter "IN" status code

Rationale and Reference(s):

experience.

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5. Can the “significant” **exposures** (identified in #4) be shown to be within **acceptable** limits?

_____ If yes (all “significant” exposures have been shown to be within acceptable limits) - continue and enter “YE” after summarizing and referencing documentation justifying why all “significant” exposures to “contamination” are within acceptable limits (e.g., a site-specific Human Health Risk Assessment).

_____ If no (there are current exposures that can be reasonably expected to be “unacceptable”)- continue and enter “NO” status code after providing a description of each potentially “unacceptable” exposure.

_____ If unknown (for any potentially “unacceptable” exposure) - continue and enter “IN” status code

Rationale and Reference(s):

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6. Check the appropriate RCRIS status codes for the Current Human Exposures Under Control EI event code (CA725), and obtain Supervisor (or appropriate Manager) signature and date on the EI determination below (and attach appropriate supporting documentation as well as a map of the facility):

Y YE - Yes, "Current Human Exposures Under Control" has been verified. Based on a review of the information contained in this EI Determination, "Current Human Exposures" are expected to be "Under Control" at the (former) Borden Chemical facility, EPA ID # 0HD 005 043 740 formerly located at 6725 Gilead St. Whitehouse, OH under current and reasonably expected conditions. This determination will be re-evaluated when the Agency/State becomes aware of significant changes at the facility.

 NO - "Current Human Exposures" are NOT "Under Control."

 IN - More information is needed to make a determination.

Note:

I supplemented the U.S. EPA's single file of available documents through a series of phone calls and informational requests. This note shall document those communications. The PA/VSI was completed on June 17, 1992. Borden's 5-acre facility became inactive in 1985, shortly after its Drum Storage Pad closure was certified-approved by the U.S. EPA (in 1984).

Although Borden had been used as a dairy between the 1930s through 1950s, between 1961 and 1982 it operated as a manufacturing center, producing lead and solvent-based printing inks. A decade ago, authors of the PA/VSI report recommended further action (i.e. groundwater sampling and analysis for VOCs) for the vicinity of an area formerly occupied by underground fuel tanks. Two underground tanks (1,000 gallons & 6,000 gallon capacities) had been removed from the location in 1991. Total Petroleum Hydrocarbons (TPH) contamination was noted, leading to excavation and offsite disposal of petroleum-contaminated (4,000 ppm) soil. Following remediation, residual TPH levels were < 20 ppm.

Borden also managed a former underground tank farm, from which chemical releases (i.e. VOCs) occurred. The 1992 PA/VSI report states *"...significant levels of VOCs were detected in groundwater samples. Nothing has been done to remediate this groundwater contamination. An (8 foot thick) clay layer appears to underlie the area at a depth of about 12 feet preventing downward migration to the primary water-bearing aquifer.... Though no soil samples were taken, subsurface soil is probably contaminated because there is groundwater contamination. Surface soil should be free of contamination because the release occurred underground."*

The PA/VSI also described an area contaminated with lead, from which 272 cubic yards of soils contaminated with up to 110 ppm lead were removed in 1988. Authors of the 1992 PA/VSI report concluded that groundwater should be sampled for metals and VOCs in the vicinity of the lead-contamination zone.

Because the U.S. EPA's file information ended with the 1992 PA/VSI report, it was not possible to decipher what had happened at the facility since 1992 without making a series of phone calls. But, following a chain of telephone calls, I gleaned the following. Admittedly, some of this information is rather 'sketchy.'

In late 1997, OEPA had been notified of the sale of the former Borden facility involving (or possibly sold to) a firm named Cherokee Environmental Risk Mgt., based in Englewood, CO. Cherokee performed additional sampling in 1999 to 'complete a certified closure.' Then, the property was resold, following demolition of onsite building structures (by a firm known as 'ERMC'). Evidently, following the closure-related sampling, a Feb. 15, 2000 Cherokee letter explains how there were, 'no remaining environmental issues.' Repeated phone requests to Cherokee scored no success in obtaining these documents or other information bearing on recent Borden site history. From the OEPA-NW District Office's archives, however, I was able to obtain a copy of a 7/8/98 letter from Cherokee addressed to OEPA. Therein, after summarizing results of the PA/VSI and requesting a 'no further action determination' from OEPA, Cherokee stated that *"Strategic subsurface samples need to be taken in order to confirm that contaminant migration into the soils and shallow groundwater has not occurred..."* A data summary report contained in the PA/VSI report shows that groundwater contaminant levels were less than MCLs in 1986.

Prior to uncovering further details on the chain of events leading to property sales, I contacted the Lucas County Recorder office, from whom I obtained the name of the current property owner for the 6725 Gilead address, which is also the former facility street address as noted on Borden's Part A application. Initially I was informed that this address is now a residential property owned by Daniel J. and Leslie A. White.

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This information was later supplemented by facts supplied through the Lucas County Auditors office, as described below. Given that the former Borden facility is evidently no longer commercially owned or operated, and is now zoned as a family residence, this would be a poor choice for a VCAA. The site no longer meets our definition of commercial facility. Presently, based on my interpretation of available records, there is little reason to suspect that hazardous constituent contamination exists in surface soils above levels of concern to human health. (This activity was reported by the signed reviewer to the file as of May16, 2002.)

In January 2005 I learned from an OEPA official that as of July 2003 a new business now occupied the site named HA International, specializing in automotive coatings. OEPA - DHWM had documentation of final closure being performed. The cleanup wasn't conducted under the State of Ohio VAP program. In late August 2005 I visited where the site should have been located; however there was no commercial street address conforming to Borden's old address as indicated on its Part A application. HA International was not observed on this street, but north of the presumed facility location there's a "B & L Automotive" which has a Logan street address bearing no apparent relation to the former Borden site. It seems as if Borden's facility may have been situated along the former railroad track line, which is now a hike/bike trail.

The former 5-acre site location is currently divided into 3 parcels (9803821 - mailing address 6711 Gilead St. a 2.8 acre parcel owned by Cocca Development corresponding to the Dollar General store and asphalt parking lot; 9803757 - a private residence situated at 6725 Gilead St. owned by Daniel White, and 9803767, another private residence situated at 6703 Gilead owned by James Fisher. While there is a local phone listing for HA International, it appears to be a business specializing in Christmas tree sales and doesn't bear any relation to the former commercial enterprise. After checking with the Village of Whitehouse (Barb Page) and the Lucas County Auditors Office & associated Engineering Dept., it does not appear as if there is any reason to pursue soil media corrective action with any owners of these parcels.

Completed by	<u>(signature)</u> <u>(print) Allen Debus</u> <u>(title) Chemist/Project manager</u>	Date <u> </u>
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Supervisor	<u>(signature)</u> <u>(print)</u> <u>(title)</u> <u>(EPA Region or State)</u>	Date <u> </u>
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Locations where References may be found:

7th Floor Archive at 77 West Jackson Blvd. Chicago, IL

now "Dollar" convenience store.

now divided into 3 paracels (98 no

Contact telephone and e-mail numbers

(name)	<u>Allen Debus</u>
(phone #)	<u>312-886-6186</u>
(e-mail)	<u>debus.allen@epamail.epa.gov</u>

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FINAL NOTE: THE HUMAN EXPOSURES EI IS A QUALITATIVE SCREENING OF EXPOSURES AND THE DETERMINATIONS WITHIN THIS DOCUMENT SHOULD NOT BE USED AS THE SOLE BASIS FOR RESTRICTING THE SCOPE OF MORE DETAILED (E.G., SITE-SPECIFIC) ASSESSMENTS OF RISK.